Helen Bader Institute for NONPROFIT MANAGEMENT at the University of Wisconsin–Milwaukee

Scholarship Application Form

☐ **Fall 20____** *(Deadline Aug. 1)*
☐ **Spring 20____** *(Deadline Dec. 15)*

ALL SECTIONS OF THIS FORM MUST BE COMPLETED. APPLICATIONS WITH MISSING INFORMATION WILL NOT BE CONSIDERED.

PERSONAL DATA

Name: _____ Student ID #: _____

Address: _____

WI Resident? ☐ Yes ☐ No

Home Phone: _____ Email: _____

Ethnic Background *(optional)*

☐ Alaskan/American Indian
☐ Black/African American
☐ Cambodian. Laotian, Vietnamese *admitted to the U.S. after 12/31/75*
☐ Hispanic
☐ Other Asian/Pacific Islander
☐ White

Have you previously received scholarship assistance from HBI? ☐ Yes ☐ No

CURRENT STUDIES

I am pursuing the (select one):

☐ MS in Nonprofit Management and Leadership

☐ Graduate Certificate in Nonprofit Management

If not currently admitted, when do you plan to begin your studies? _____

Are you admitted to, or do you intend to apply to any other degree program at the University of Wisconsin-Milwaukee during the time you will be completing this Graduate Certificate or MS program? ☐ Yes ☐ No

If so, please specify which degree program: _____

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FINANCIAL INFORMATION

Please list the types and amounts of funding you will contribute or receive to pay for coursework during the selected semester ONLY.

Employer Support

Describe your employer's policy on reimbursement for employee training/educational costs, if any. You may attach a copy of your agency's tuition assistance/reimbursement policy, if necessary.

Employer Assistance *(Leave blank if not applicable):* _____

Employer Name _____

Other Training/Educational Assistance

Will you receive, or do you intend to apply for scholarships or other forms of financial assistance (e.g. GI Bill/Veteran's Benefits, Americorps funding, federal educational loans, teaching or research assistance, etc.)? ☐ Yes ☐ No

If so, please specify the types and amounts of financial assistance you will receive or intend to apply for. You may attach a separate page, if necessary.

Type of Funding Assistance	Anticipated Amount

Personal Financial Resources Available _____

Other Financial Resources Available _____

Estimated Scholarship Need _____

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STUDENT STATEMENT

Write a brief statement (300-500 words) about your educational objectives and career goals. Be sure to include a description of any extenuating circumstances that may contribute to your need for scholarship funding. Feel free to discuss any previous HBI scholarship awards you may have received. A separate page may be attached, if necessary.

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STUDENT CERTIFICATION

Please read this section completely and sign below.

In submitting this application, I understand that:

- I MUST be enrolled in ***at least one*** approved course from the curriculum of my chosen nonprofit-focused program in order to eligible for an HBI scholarship award. If, at any time during the selected semester, I withdraw from that course, I may be required to return my scholarship award in full.
- Various scholarship awards maintain different GPA requirements. However, should my overall GPA fall below 3.0 I no longer remain eligible for HBI scholarship funding.
- If at any time I suspend my studies, I forfeit the remainder of any outstanding scholarship award.
- If my application is not delivered or postmarked on or before the posted deadline, it will not be considered.
- All information provided will be treated confidentially and used *only* for consideration by the HBI Scholarship Committee.
- I certify that all of the information on this application is correct and complete.

_____ _____

Student Signature Date

Return your completed and signed application in an envelope marked CONFIDENTIAL to one of the following:

Via Post:

Helen Bader Institute for Nonprofit Management
P.O. Box 413
Milwaukee, WI 53201

In Person to HBI Offices:

Helen Bader Institute for Nonprofit Management
UW-Milwaukee Alumni House
Room 381
3230 E Kenwood Blvd.
Milwaukee, WI

Or via email to: hbi-info@uwm.edu

Updated 1/24/2018