



SECU Bridge to Career Scholarship Application

GUIDELINES:

To be considered for this scholarship program, a student must:

- Be a **US citizen, North Carolina resident** and present a **valid** Social Security card and a **current** NC Driver's License or Identification Card.
- Be in one of the following target groups:
 - Unemployment insurance claimants
 - Unemployed and underemployed adults (**Note:** Underemployed will be defined as individuals earning 200% below the federal poverty level listed on page three of this application. Preference will be given to students with limited or no access to financial aid from other programs.)
 - Military veterans
 - Members of the NC National Guard.
- Documentation of proof of the above will be required (2018 tax return, DD214, current paystub, unemployment information).

Students must be enrolled in one of two Continuing Education pathways: Health Care or Bio Pharma. Classes that qualify under these pathways include, Nurse Aide I, Phlebotomy, Bio Works and Advanced Bio Works.

- Not be a Director, employee, or immediate family member of an employee of the State Employees' Credit Union or SECU Foundation.
- ***If chosen as a finalist***, applicant will be contacted for an interview.
- ***If chosen as a recipient***, scholarship recipients must consent to the release of their names and images for publications written/distributed by the System Office, the local Community College, and/or the State Employees' Credit Union and its Foundation.

**Return applications to your program director:
Biopharma: Leslie Isenhour - (919) 209-2593
Healthcare: Connie Grady - (919) 464-2355**

**Applications are due no later than 12:00 noon
Friday, October 11, 2019**



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Student's Name: _____ Social Security #: _____ **(required)**

Address: _____ City: _____ State: _____ Zip: _____

Telephone #: _____ NC Driver's License #: _____

Email: _____

Race: _____ Gender: Male Female

Pathway Applied for: _____ **County of Residence:** _____

I qualify for this scholarship under the following criteria (please check **all** that apply):

I am currently unemployed. (*Beginning date of unemployment:* _____)

I am a military veteran.

I am a member of the NC National Guard.

I am working and earn wages at or below 200% of the federal poverty guidelines (*see guidelines*).

If you are qualifying under the criteria "working and earn wages at or below 200% of the federal poverty guidelines", please indicate the number of dependents living in your household that you are responsible for.

Number of dependents: _____ Ages: _____

Work History					
Have you worked in the past 12 months?		No	Yes	If yes, complete the following:	
Employer/Job Title	Start/End Date	Weeks Employed	Hourly Wage	Hours Per Week	Comments

Explain in your own words why you should receive these funds:

I certify that I am **NOT** a director, employee or family member of an employee of the SECU or the SECU Foundation. _____
(Initial)

I hereby verify that all the information given by me on this application form is complete and accurate to the best of my knowledge.

Signature

Date

2019 SECU Underemployed Adult Guidelines

200% of the Federal Poverty Guidelines

SOURCE: *Federal Register*, Vol. 82, No. 12 February 1, 2019, pp. 167-168. Retrieved from <https://www.federalregister.gov/documents/2019/02/01/2019-00621/annual-update-of-the-hhs-poverty-guidelines>

(Actual Guidelines on Federal Register listed at 100%)

Family Unit	200% of Poverty Guidelines
1	24,980.00
2	33,820.00
3	46,660.00
4	51,500.00
5	60,340.00
6	69,180.00
7	78,020.00
8	86,860.00
For each additional person, add \$8,840.	