



COMMUNITY ACTION AND HUMAN SERVICES DEPARTMENT

2019 SCHOLARSHIP APPLICATION

The Miami-Dade Community Action and Human Services Department (CAHSD) and the Community Advisory Committees (CAC) are accepting scholarship applications for the 2019 school year. The deadline for submission is April 12, 2019. Achieving a higher education is an important life choice for young people and their families. CAHSD in conjunction with the CAC, is offering sixteen (16) \$1,500 scholarships to deserving students who meet the eligibility requirements.

ELIGIBILITY REQUIREMENTS:

- Individuals must: be between the ages of 16-25; a senior in high school or have obtained a high school diploma/GED; and currently enrolled in college or planning to enroll in Fall 2019
- Applicants must reside in one of the following target areas: Allapattah, Brownsville, Coconut Grove, Culmer/Overtown, Edison/Little River, Florida City, Goulds, Hialeah, Liberty City, Little Havana, Naranja, Opa-Locka, Perrine, South Beach, South Miami or Wynwood
- Family income must fall within the 125% Poverty Income Guidelines of the Community Services Block Grant (CSBG) mandated requirements
- Have a minimum 2.0 GPA

APPLICATION CHECKLIST

- Complete Scholarship Application
- Attach a typed essay. The essay must be typed in 12 point standard font (Times New Roman). The statement must address each of the following questions:
 - a) What does Community Action mean to you?
 - b) Please describe in your own words: a. What character traits you possess that have helped you to overcome personal adversity b. Your degree of commitment to pursue a college education c. How you anticipate making a contribution to society?
 - c) What are your future career plans? How do you plan to use your studies to achieve your future career plans?
 - d) Imagine yourself in 10 years from today. What goals and ambitions do you have for yourself, personally and professionally?
 - e) What extenuating circumstances might prevent you from entering college?
 - f) Why are you a good candidate to receive this award?
- Proof of income for everyone in the household (copy); see Section E
- Proof of address in target area: Driver's License or State of Florida ID
- Proof of age: Birth Certificate or Driver's License of applicant only (copy)
- Social Security Card of applicant only (copy)
- Two recommendation letters
- Copy of transcript

Completed applications must be post marked or hand delivered by Friday, April 12, 2019 to:
Miami-Dade Community Action and Human Services Department
Scholarship Program
Alton V. Sears, Special Projects Administrator
701 NW 1st Court, 10th Floor
Miami, Florida 33136



COMMUNITY ACTION AND HUMAN SERVICES DEPARTMENT

SCHOLARSHIP APPLICATION

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Please type or print in ink.

Deadline for Application: Friday, April 12, 2019

Indicate Target Area: _____

GENERAL INFORMATION

First Name: _____ Last Name: _____

Street Address: _____ Apartment #: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Alternate Phone Number: _____ Social Security Number: _____

E-mail Address: _____ Date of Birth: _____

Classification during the Fall (August) 2019 semester:

UNDERGRADUATE

GRADUATE

I will be a _____ (Freshman, Sophomore, Junior or Senior)

Name of Institution planning to attend: _____

Major or expected major: _____

Career choice: _____

Secondary or minor area(s) of study: _____

Expected enrollment status for 2019: full time part time

2019: Incomplete applications will not be considered.

Name of High School/University currently attending: _____

High School GPA: _____ (weighted) _____ (unweighted) ACT Score: _____ SAT Score: _____

Have you participated in Dual Enrollment classes? Yes No

What college did you attend? _____ Credits Earned _____

College GPA: _____ College Credits Completed: _____

(1) List of high school, college/university/community activities in which you have participated (include leadership roles).

(2) List Special honors/awards.

(3) List work or internship experiences.

2019: Incomplete applications will not be considered.



Community Action and Human Services Department

Financial Information

First Name: _____

Last Name: _____

COMMUNITY SERVICES BLOCK GRANT (CSBG) 125% OF POVERTY INCOME GUIDELINES	
Family Size	125%
1	\$15,175
2	\$20,575
3	\$25,975
4	\$31,375
5	\$36,775
6	\$42,175
7	\$47,525
8	\$52,975
Add this amount for each additional person in the household with more than 8 people.	\$5,400

List of Household Occupants	Relationship	Is Occupant Working	Source of Income	Amount of Monthly Income

Copies of proof of income for every member of the household must be provided. Proof can be any of the following formats:

- A. Consecutive pay stubs for the last thirty (30) days or 2018 income tax return.
- B. Award letter or letter from an agency from which income is received including:
 - SSA, SSI, V.A. Pension, TANF
 - Child Support, Alimony
 - Unemployment Benefits

APPLICATIONS CANNOT BE PROCESSED WITHOUT PROOF OF INCOME.

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Community Action and Human Services Department

Scholarship Statement of Accuracy

I _____ have read and agree to the following (initial each statement):

- I hereby affirm that all of the above stated information provided by me is true and correct to the best of my knowledge. I also affirm that the information provided in the Financial Information portion of the application is true and correct. I acknowledge and agree that Community Action and Human Services Department reserves the right to verify my income and financial information supplied herein as a condition of any scholarship award.
- I consent to having my picture taken and used for any purpose deemed necessary to promote the Community Action and Human Services Department's Scholarship Program.
- I understand that if chosen as a scholarship winner and according to the scholarship policy, I must provide evidence of enrollment/registration at an accredited, post-secondary institution before my scholarship funds can be awarded. If I am not enrolled in an educational institution during the Fall Semester, the scholarship award will be returned to the appropriate Advisory Committee and CAHSD's Community Service Block Grant (CSBG) Scholarship Fund, and another recipient will be selected.
- I acknowledge that the scholarship funds will be sent directly to my school's Financial Aid Office on my behalf. I understand that this scholarship award is to be used solely and exclusively for the cost of tuition, books or other necessary expenses associated with the program in which I am enrolled.
- I understand that if chosen as a scholarship winner, I agree to attend the Community Action and Human Services Department's Annual Scholarship Award Banquet. If I am unable to attend, a representative will attend on my behalf.

Signature of scholarship applicant: _____

Date: _____

2019: Incomplete applications will not be considered.

Community Action and Human Services Department

Target Area Boundaries

Culmer CAC Boundaries:

NW 23rd Street to the north and Miami River to the South; NW 1st Court (Railroad) to the East and NW 7th Avenue to the West.

Florida City CAC Boundaries:

SW 8th Street (Lucy Street) to the North and Arthur Vinning Davis Parkway to the South; Krome Avenue to the East and Redland Road to the West.

Little Havana/Accion CAC Boundaries:

Miami River to the North and SW 37th Avenue to the South; I-95 to the East and 27th Avenue to the West.

Perrine CAC Boundaries:

SW 172nd Street to the North and SW 186th Street to the South; South Dixie Highway to the East and SW 113th Court to the West.

Brownsville CAC Boundaries:

NW 62nd Street to the North and NW 36th Street to the South; NW 7th Avenue to the East and NW 37th Avenue to the West.

South Miami CAC Boundaries:

SW 62nd Street to the North and SW 72nd Street to the South; SW 57th Avenue to the East and SW 62nd Avenue to the West.

Allapattah CAC Boundaries:

Airport Expressway to the North and 836 Expressway and Miami River to the South; I-95 to the East and NW 37th Avenue to the West.

Coconut Grove CAC Boundaries:

McFarlane Main Highway, Franklin Avenue; Charles Terrace and Loquet to the North and South Dixie Highway to the South; 27th Avenue to the East and Lejeune Road to the West.

Edison CAC Boundaries:

NW 119th St. to the North and NW 36th St. to the South; FEC railroad track to the East and NW 27th Ave. to the West.

Naranja CAC Boundaries:

Limited to the North at 240th Street SW and to the South part of 296th Street SW, up to 147th Avenue and 288th Street along Biscayne Drive; to the East is limited by SW 133rd Place and SW 163rd Avenue to the West.

South Beach CAC Boundaries:

41st Street to the North and South Beach point to the South; the sea to the East and West Dade Boulevard to the West.

Opa Locka CAC Boundaries:

NW 151st Street to the North and 119th Street to the South; NW 17th Avenue to the East and NW47th Avenue to the West.

Liberty City CAC Boundaries:

NW 79th Street to the North and NW 62nd Street to the South; West of I-95 to the East and NW 37th Avenue to the West.

Hialeah CAC Boundaries:

Okeechobee Road to the West and Railroad track to the East; Hialeah Drive (54th Street NW) to the South and 25th Street East thru Jose Marti Boulevard to the North.

Wynwood CAC Boundaries:

NW 36th Street to the North and NW 15th Street to the South; Biscayne Bay to the East and NW 7th Avenue; and part of the FEC Railroad track to the West.

Goulds CAC Boundaries:

Black Creek to the North and SW 232nd street to the South; SW 112th Avenue to the East and SW 127th Avenue to the West.

2019: Incomplete applications will not be considered.