

The Odie Scholarship Fund was created in May 2017 in conjunction with the Agency's 30th anniversary and the retirement of the Agency's founder, The Rev. Dr. Robert Odierna. "Odie" has always had a strong conviction to higher learning and ensuring every child was given the opportunity to advanced learning programs. The fund was started with an initial investment of \$60,000 with additional \$40,000 in pledges to be paid over a 5-year period.

Target Population/Applicant Criteria

The scholarship fund was created to assist children of families who have/are participating in the Agency's Transitional Housing Program for single mothers with children. Funds are to be used to assist the children in accessing higher educational/learning opportunities.

Eligible Costs

- Tuition for Post-Secondary Institutions or Trade Schools
- Tuition or Fees for summer accelerated learning program (Break Through Manchester, St. Paul's Leadership Institute, etc.)
- Supplies Necessary for Field of Interest (tools, books, enrollment fees, etc.)
- Transportation/Travel Expenses for short-term advanced learning opportunities (not for post-secondary education)
- Costs associated with SAT or ACT summer courses
- Other Ancillary Costs

Scholarship Awards

- Awards will be made in the amount of \$250-\$5,000 based on program and need
- The number of annual awards will depend on the funds available, which will be determined by April 1 of each year for a July 1- June 30 year.
- Applications will be on a rolling basis
- Interviews may be conducted
- Application review and award determinations will be made by the Front Door Agency CEO and Odie. The Board of Directors reserves the right to add additional members up to a maximum of two; and/or replace Odie and the CEO if he/she is unable to fulfill this responsibility. These individuals shall be appointed by a majority vote of the Board.

Application Process

- Complete the Application in its entirety typed. Do not handwrite responses please. The form is a fillable form.
- Attach a resume if available
- Submit to the contact listed on the application
- Allow for up to 30 days for a response

Personal Information:

Name (Last Name First)		Birth Date:	
Current Address		City	State Zip
Telephone #:		Email:	Cell:
Emergency Contact Name		Emergency Contact Phone #:	

Current School Information:

Current High School or High-Set Program:	Date of Planned Graduation:	Current G.P.A.
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**List All School Activities:
You may attached a resume
instead**

Activity	Dates Participated to/from:	Position Held	Special Honors

Work Experience: List most recent first

Employer	Dates Worked to/from:	Position Held

Community Activities:

Activity	Dates Participated to/from:	Position Held/Special Honors

Educational Goals:

School Level	Name & Location of School	Full time or Part time	Date You Plan to Attend	Anticipated Field of Study
College				
Trade School				
High School				
Special Trainings/Certifications (CPR, etc.)				
Higher Learning Program				

Household Composition:

List all persons in your household not including yourself

Name (Last Name First)	Relationship	M/F	Date of Birth
Do you expect any additions to the household within the next 12 months? Y or N	Explain:		

Transitional Housing History:

List Dates you Resided in Transitional Housing Program of the Front Door:	Date Moved In:	Date Left:	Mother's Name. (include last name while resident if changed)
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Other:

Have you or any member of your household ever been convicted of a felony or misdemeanor crime?	Date Convicted:	Describe Conviction:	Are you currently on probation or parole?
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Financial Information:

If you are a dependent student, please also have your parents complete this form using information from their most recent IRS tax return. You are a dependent student if you are under 24 years of age. If you are independent, information about you and your spouse (if applicable) must be included. Figures should be taken from your most recent IRS tax return.

I am: ___ Dependent ___ Independent Student	Student	Parent
Adjusted Annual Gross Income:	\$	\$
Untaxed income/benefits: (TANF, SSI, Food Stamps)	\$	\$
Savings (stocks, cash in bank, etc.):	\$	\$

Anticipated Cost of Program:

Anticipated Cost of Tuition	\$
Anticipated Cost of Room/Board	\$
Anticipated Cost of Supplies/Books:	\$
Anticipated Miscellaneous Cost:	\$
Financial Aid Received to Date:	\$

Please List What you are Requesting a Scholarship To Assist With:

Please Answer the Following on a Separate Sheet of Paper (please type):

Describe what you hope to achieve in the next step of your education. What do you imagine the experience will be like? How does your educational program you will be pursuing fit with your personal and/or career goals?

Certification:

I certify that the information given in this application is true to the best of my/our knowledge. I understand that any false information is punishable by law, and could be grounds for cancellation of this application or termination of residency after occupancy.

Applicant Signature: _____ Date_____

Release of Information Authorization:

I do hereby authorize The Front Door Agency, Inc., and its staff to obtain any information or materials deemed necessary to determine my eligibility for a scholarship including but not limited to, contacting current and past employers or schools provided in this application in which may provide information that could substantiate or verify information given this application.

Applicant Signature: _____ Date_____

Please submit application to:

**The Front Door Agency
7 Concord St ♦ Nashua, NH, 03064
Telephone: 603-886-2866 Fax: 603-886-9214
Att: Maryse Wirbal, CEO
Email: mwirbal@frontdooragency.org**