

THE CITY OF NEW YORK
DEPARTMENT OF CITYWIDE ADMINISTRATIVE SERVICES | HUMAN CAPITAL
THE DAVID DINKINS MUNICIPAL BUILDING, 1 CENTRE STREET, NEW YORK, NEW YORK 10007

THE HUNDRED YEAR ASSOCIATION OF NEW YORK
2018 E. VIRGIL CONWAY COLLEGE SCHOLAR AWARDS APPLICATION

COLLEGE STUDENT

THE HUNDRED YEAR ASSOCIATION OF NEW YORK IS COMPRISED OF COMPANIES, RELIGIOUS INSTITUTIONS, AND NOT-FOR-PROFIT ORGANIZATIONS THAT ARE OVER 100 YEARS OLD. THE ASSOCIATION RECOGNIZES ACADEMIC EXCELLENCE, LEADERSHIP AND COMMUNITY SERVICE OF SONS AND DAUGHTERS OF NEW YORK CITY CAREER CIVIL SERVICE EMPLOYEES.

PLEASE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION AND INSTRUCTIONS

SECTION I: COLLEGE STUDENT INFORMATION	
1. APPLICANT NAME (Last, First) _____ ADDRESS _____ E-mail Address _____ Cell Phone No. _____	2. SOCIAL SECURITY NUMBER _____ 3. FALL 2018 COLLEGE CLASS ___Freshman ___Sophomore ___Junior ___Senior
4. NAME OF COLLEGE OR UNIVERSITY APPLICANT IS ATTENDING _____ COLLEGE OR UNIVERSITY ADDRESS _____	5. COLLEGE GRADE POINT AVERAGE TO DATE _____ 6. NAME OF HIGH SCHOOL _____ YEAR OF GRADUATION _____
7. TOTAL SCORE ON SAT OR ACT EXAMINATION (Attach a copy of report)	8. TOTAL FINANCIAL AID AND OTHER FUNDING FOR 2018. PLEASE SEE INSTRUCTIONS ON REVERSE SIDE. (Attach copy of FAFSA submission and SAR)
9. LIST ON SEPARATE PAGE COLLEGE AND COMMUNITY ACTIVITY AND SERVICE. INCLUDE SUCH ITEMS AS HONORS, AWARDS, MEMBERSHIP IN COLLEGE AND COMMUNITY ORGANIZATIONS, FORMS OF RECOGNITION AND ACHIEVEMENT.	
10. YOU HAVE QUALIFIED TO APPLY FOR THIS SCHOLARSHIP BECAUSE AT LEAST ONE OF YOUR PARENTS IS AN EMPLOYEE OF THE CITY OF NEW YORK. PLEASE ATTACH A SHORT ESSAY IN WHICH YOU DESCRIBE YOUR MOST MEANINGFUL ACHIEVEMENT SO FAR AND WHAT IT SAYS ABOUT YOUR PUBLIC SERVICE VALUES. YOUR COMMENTS SHOULD NOT EXCEED ONE (2) TYPE WRITTEN PAGES.	
11. NAME(S) AND ADDRESS(ES) OF LOCAL NEWSPAPER(S) _____	
SECTION II: INFORMATION ABOUT CITY EMPLOYEE WHO IS PARENT OR GUARDIAN OF APPLICANT	
1. NAME OF PARENT OR GUARDIAN LAST NAME _____ FIRST NAME _____	2. ADDRESS (LEGAL RESIDENCE) _____ E-mail Address _____
3. NAME AND ADDRESS OF EMPLOYING CITY AGENCY _____ E-mail Address _____	4. CURRENT JOB TITLE ____ ANNUAL SALARY _____ DATE ENTERED CITY SERVICE _____
5. GROSS ANNUAL FAMILY INCOME FOR YEAR ENDING DECEMBER 2017 City Employee's Salary _____ Other Parent's Salary* _____ Other (Explain) _____ Total Income _____ <small>*Include salary of non-custodial parent where applicable.</small>	6. HOME TELEPHONE NO. _____ CELL PHONE NO. _____ BUSINESS TELEPHONE NO. _____ 7. SOCIAL SECURITY NUMBER _____

DATE

SIGNATURE OF PARENT OR GUARDIAN

SIGNATURE OF APPLICANT

INFORMATION AND INSTRUCTIONS

Please type all information. Print completed form and submit, along with essay and all other required documentation to: NYC Department of Citywide Administrative Services, The Hundred Year Association Awards Programs, David N. Dinkins Municipal Building, 1 Centre Street, 24th Floor South, Room 2445, New York, NY 10007.

ELIGIBILITY

A. Parent or Guardian

1. A permanent career City civil service employee with at least two years of continuous full-time service in a position for which the salary is paid in whole or in part by the City of New York.
2. Gross annual ordinary income for the year ending December 2017 may not exceed \$125,000 for parents and/or guardian. The applicant's income should not be included. Salaries listed should be before deductions for contributions to deferred compensation plans and/or other pre-tax benefits programs. Capital gains or losses should not be considered. If parents are separated or divorced, please describe financial arrangements with respect to applicant. Please include copies of page 1 of both parents' 2017 Federal Income Tax Return(s).

B. Applicant

1. Regular attendance at a private or public secondary school.
2. Matriculated as a full-time student at a private or public college or university.
3. Has taken the SAT or ACT examination. A copy of the test report must be submitted with the application.
4. Current College Transcript with GPA.

SELECTION CRITERIA

1. Academic achievement, leadership and commitment.
2. Record of college and community activity and service.
3. Score on the SAT or ACT examination.
4. Financial need.
5. Other information which The Hundred Year Association Awards Committee may require or deem pertinent.

FINANCIAL AID

1. Attach copy of FAFSA (Free Application for Federal Student Aid) submission and SAR (Student Aid Report).
2. Attach copy of letter received from college/university which details financial aid award for the upcoming year.
3. If letter has not been received yet, or if financial aid has not been requested, please so state.
4. Upon receipt of financial aid award letter please send copy as soon as possible to the Department of Citywide Administrative Services at the address listed at the top of this page.
5. List all other scholarships, grants or loans.

SUMMARY

1. All applications will be reviewed for eligibility and verification by the New York City Department of Citywide Administrative Services.
2. The Hundred Year Association Awards Committee will determine the winners following a personal interview with each finalist.
3. All information requested in the application must be completed for an applicant to be considered for an award, and the application must include the following documents:
 - a. SAT or ACT report.
 - b. 2017 Federal Income Tax Return (page 1 only) for both parents/guardians.
 - c. FAFSA submission and SAR.
 - d. Financial aid award letter from college/university.
 - e. Essay.
 - f. Current College Transcript with GPA
 - g. Supplementary material may be included as applicant deems appropriate.
4. Application must be signed by both City employee parent/guardian and applicant.

Voter Registration: If you are not a registered voter, please visit www.elections.ny.gov/Voting Register.html