



## North Hills Community Outreach Education Assistance Program Application

NHCO's Education Assistance Program was developed for the non-traditional adult student meeting the following eligibility requirements:

- Applicants must reside in northern Allegheny County, outside the City of Pittsburgh, **or** must attend college or vocational school in northern Allegheny County, outside of the city of Pittsburgh
- Applicants must fall into the income guidelines (200% of federal poverty level or less),
- Applicants must be registered at a post-secondary school or have plans to register at the time of application,
- Applicants must demonstrate a financial hardship or need through a **500-word** essay.

Name: \_\_\_\_\_ Last 4 digits of Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Community or Township: \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail address: \_\_\_\_\_

Gender:  Female  Male

Race/Ethnicity (optional) \_\_\_\_\_

Do you have a disability?  Yes  No

If yes, what type?  Physical  Mental

Marital status:  Married  Single  Divorced  Separated  Widowed

How many dependents live in your household? \_\_\_\_\_

Ages of dependents: \_\_\_\_\_

Describe your educational history \_\_\_\_\_

Are you currently enrolled in school?  Yes  No

If yes, name of school \_\_\_\_\_

How many credits have you earned? \_\_\_\_\_

If not enrolled, have you been accepted?  Yes  No

If yes, for what term? \_\_\_\_\_

Name of school: \_\_\_\_\_

Will you be:  Full-time  Part-time

What is your major? \_\_\_\_\_

What type of degree? \_\_\_\_\_

What is your anticipated date of degree? \_\_\_\_\_

Are you currently receiving any scholarships or grants?  Yes  No

If yes, please list \_\_\_\_\_

Are you currently employed?  Yes  No

If yes, where? \_\_\_\_\_

Will you work during the school term?  Yes  No

How did you find out about the NHCO Education Assistance Program? \_\_\_\_\_

What is the purpose of this education?

Career advancement  New career field  Enter/re-enter job market  Other

**Financial Information:**

What is your current monthly **household** income? \_\_\_\_\_

What is the source of your income? \_\_\_\_\_

**Career Objective:**

On a separate sheet, please include a typed essay **of up to 500 words** demonstrating your hardship and how this grant will improve your life. **You will also need to include your household proof of income for the previous month**, such as salary pay stub, SSI awards letter, child support statement, public assistance information, etc.

**Certification:**

By your signature, you certify that the information provided by you in this application is true. You agree to provide a copy of your grades and/or transcript upon request. You also authorize NHCO to use your name and photo for publicity relating to the awarding of this grant.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed application to:

Resource Coordinator  
North Hills Community Outreach  
416 Lincoln Avenue  
Pittsburgh, PA 15209

412-408-3830 Ext. 3217  
[briedel@nhco.org](mailto:briedel@nhco.org)

**This completed application should not be construed as a commitment to receive education assistance funding from NHCO.**