



Human Resource Leadership Association of Eastern Connecticut

2018 SCHOLARSHIP PROGRAM

Guidelines

- HRLA will award the HRLA Scholarship to an HRLA member actively pursuing an undergraduate or graduate degree or taking the SHRM-CP or SHRM-SCP; PHR or SPHR Certificate Program, or other possible trainings*.
- The HRLA Scholarship Committee (consisting of Chair, past recipients, and legal advisor) will select the successful recipient based on: the candidate's written Personal Statement, connection to and participation with HRLA and the strength of any Letters of Recommendation provided.
- There may be two different Scholarships provided in 2018:
 - 1. HRLA Member obtaining a degree.
 - 2. HRLA Member obtaining a SHRM-CP or SHRM-SCP; PHR or SPHR Certificate Program or training.

Disbursement

HRLA will disburse the funds to the successful candidate's school of choice in the name of the successful candidate as a credit to his/her account.

Eligibility

All candidates for the HRLA Scholarship must:

- 1. Be registered as a student in a school's program or registered as taking a SHRM-CP or SHRM-SCP; PHR or SPHR Certificate Program or specified training*;
- 2. Be an active, paid-in-full HRLA member;
- 3. Have fully completed and submitted the HRLA Scholarship Application, Personal Statement and at least one Letter of Recommendation to the HRLA Scholarship Committee by the deadline date of April 1, 2018.

Procedures

- In evaluating each Application, the HRLA Scholarship Committee will consider an applicant's: written Personal Statement, connection to and participation with HRLA and the strength of any Letters of Recommendations.
- Application Parts:
 - 1. Completed HRLA Scholarship Application Form;
 - 2. Written Personal Statement;
 - 3. Signed Certification Statement;

^{*}or Program approved by the Scholarship Committee

- 4. At least one Letter of Recommendation from an individual who is not a member of the applicant's immediate family. For purposes of the HRLA Scholarship Application, "immediate family" includes the applicant's spouse, children (son or daughter), and parents.
- The completed HRLA Scholarship Application, written Personal Statement and Letter of Recommendation(s) must be post-marked no later than **April 1, 2018.** Only fully completed Applications and required documentations will be considered.
- The HRLA Scholarship Committee will review the Applications and make their recommendations to the HRLA Board of Directors at the April 2017 Board meeting. Successful candidates will be notified by June 15, 2018. The HRLA Scholarship Committee will not notify unsuccessful candidates.

All submissions must be mailed no later than April 1, 2018 to:

HRLA Scholarship Program
Attention: Ms. Jessica Linicus
591 New London Turnpike
Stonington, CT 06378 (no COD please)

Or emailed to <u>jlinicus@newhaven.edu</u>



HRLA Scholarship Program

2018 Application Form

Application Deadline: April 1, 2018

Name:			
Last	First		Middle
Social Security Number:			
Permanent Address: Street:			
City: State: Zip:			
Mailing Address: (If different from	above address) Street:		
City: State: Zip:			
Phone: (H)	(W))	
Present Employment: Position:		Part-time _	Full-time
Employer:			
School Enrolled in:		_ Program:	
School Address:			
School Start Date:			
Degree Goal: Certificate Asso	ociates Bachelors	Graduate	PHd Other
Anticipated Date of Completion:			

^{*}or Program approved by the Scholarship Committee

HRLA Scholarship Program

Application Form

2. Personal Statement of Applicant

Please attach a **Personal Statement,** of not more than two pages, discussing your academic achievement, career and personal aspirations, as well as any other relevant comments. If applicable, include a listing and description of your leadership activities with HRLA and/or in your community.

3. Certification Statement of Applicant

I certify the information I have provided herein is true and correct to the best of my knowledge.

Additionally, I give permission to use my name and/or photograph in any SHRM/HRLA press release or newsletters.

Applicant's Signature:		Date:		
4.	Letter of Recommendation f	or Applicant		
his/he	* *	at for a Scholarship award based on your knowledge of d personal qualities. If applicable, indicate special		
Lette	ter of Recommendation is from:			
Printe	nted Name	Signature		
Empl	ployer:			
Relat	ationship to Applicant and Length of Time K	Known Applicant:		

Please note that recommendations from an applicant's spouse, children (son or daughter), and/or

parents will not be considered.

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