

The ALPS AWARD

APPLICATION PACKET

Purpose

To provide adult students financial assistance so they can attend a trade school, college, or certified training program that will help them further their careers and improve their financial wellbeing.

Award

The ALPS Award will be awarded to qualifying adult students in the amount of \$1,500 per award per applicant per calendar year.

Eligibility

1. Applicants must show proof of enrollment in a college, trade school, or certified technical program.
2. Applicants must have been a member of TFCU/ALPS for at least six months prior to the application deadline.
3. Applications will be accepted year-round with application deadlines being the last day of each quarter 12/31, 3/31, 6/30, and 9/30 to qualify for the next funding period.
4. Applicants must be 18 years of age and older and are continuing their education to improve life circumstances.
5. For 2023 only, the ALPS Award is only available to residents of Sitka and Petersburg.
6. Applicants must plan to reside in the State of Alaska after graduation or completion of certification program.
7. Applicants must complete a 60-minute financial education session with a TFCU certified financial counselor prior to funding.
8. Applicants must include a current resume with application. A resume template is provided in the application packet if you do need guidance in how to write a resume.

Selection Criteria

1. Tongass Federal Credit Union membership / ALPS membership
2. Proof of enrollment in qualified program.
3. Answers to applicant questionnaire.
4. Plans and goals for the future.

Payment

1. After scholarship deadline, the TFCU scholarship committee will select a winner within 21 days.
2. A one-time payment will be mailed via check to the school's mailing address on the scholarship application, 14 days prior to the program start date on the application.

Completed applications should be sent as a pdf file to ktatsuda@tongassfcu.com. Please include applicant's name as part of the file name (ie. 2023 ALPS Award Application_LastName,FirstName).

Alternatively, completed printed applications may be mailed to: Tongass Federal Credit Union, Attention: ALPS Award, 2000 Tongass Ave., Ketchikan, Alaska

Or delivered to the Tongass Federal Credit Union offices in Sitka or Petersburg.

Questions about the application process may be directed to ktatsuda@tongassfcu.com. Thank you for applying!

ALPS AWARD APPLICATION FORM

Applicant Information

First Name: _____ Last Name: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Phone Number: _____ Home _____ Cell _____ Work _____ Other

DOB: _____

Program Information

Name of College or Trade School: _____

Financial Aid Office Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Phone Number: _____ Fax Number: _____

Major Field of Study or Degree/Certificate Program: _____

Program Start Date: _____ Expected Completion Date: _____

Schools Previously Attended:

Dates Attended:

Diploma or Degree Earned (if any):

Applicant Questionnaire

Please complete these questions thoughtfully and thoroughly. You may write your answers on a separate sheet of paper and return with completed application.

1. Tell us about yourself. Please include a short description of your personal and professional history, and your hobbies and interests.

2. What are your dreams and goals for the future?

3. Why is the educational program you plan to attend important to you? How will it help you reach your goals?

4. *How do you think you competing this educational program will add value to you, your family, friends, and community?*

The information provided in my application is, to the best of my knowledge, complete and accurate. I grant permission to:

(College or School Name) _____ to release to Tongass Federal Credit Union any information necessary to process my scholarship funds if awarded.

Applicant's Signature Date

Completed applications and resume should be sent as a pdf file to ktatsuda@tongassfcu.com. Please include applicant's name as part of the file name (ie. 2023 ALPS Award Application_LastName,FirstName).

Alternatively, completed printed applications may be mailed to:

Tongass Federal Credit Union
Attention: Scholarship
2000 Tongass Ave.
Ketchikan, Alaska

Or delivered to the Tongass Federal Credit Union offices in Sitka or Petersburg.

For internal use only:

Applicant Name:			
Evaluator Name:			
Relationship to Applicant:			
Daytime Contact No:			
E-mail Address:			
Evaluator Signature:		Date:	

RESUME TEMPLATE

YOUR NAME

Job Title

Telephone | Email | Street Address, City, ST ZIP Code

Skills & Abilities

You might want to include a brief summary of certifications and professional skills.

Experience

Company Name, Location

Dates From—To

This is the place for a brief summary of your key responsibilities and accomplishments.

Dates From—To

Company Name, Location

This is the place for a brief summary of your key responsibilities and accomplishments.

Dates From—To

Company Name, Location

This is the place for a brief summary of your key responsibilities and accomplishments.

Education

School name, location, degree

Years From—To

You might want to include your GPA here and a brief summary of relevant coursework, awards, and honors

Communication

You delivered that big presentation to rave reviews. This is the place to showcase your skills.

Leadership

Are you head of the condo board, or a team lead for your favorite charity? This is the perfect place to let everyone know