



## APT: Apartment Professional Training SCHOLARSHIP APPLICATION

The Greater Charlotte Apartment Association Education Foundation (GCAAEF) invites GCAA members to participate in its annual **Apartment Professional Training (APT) Scholarship Program**. Each year, one or more outstanding apartment industry professionals will receive a full scholarship for an NAAEI Credential or Certification Program (NALP, CAM, CAPS, CAMT, or CAS) offered by the GCAA in 2020. *These scholarships have been made possible by the generous donations of GCAA members.*

All applicants must hold a valid High School diploma (or equivalent) and have one year of experience in the multi-family housing industry. All applications will be considered carefully, and particular emphasis will be placed on an individual's commitment to the industry, general industry knowledge and overall character. Scholarship recipients will each receive full tuition to the program they have selected and must complete the program in 2020.

**Completed applications must be received at the Greater Charlotte Apartment Association Education Foundation (address below) by November 15, 2019.** Incomplete or late applications will not be considered.

All applications will be reviewed anonymously by the GCAAEF Board of Directors. If an applicant's management company offers a tuition reimbursement program, he or she will not be eligible for an APT scholarship. Scholarship recipients will be notified by November 22, 2019 and will be recognized at the GCAA Bravo Awards Gala on December 12, 2019. Applicants who are not contacted are encouraged to apply again next year.

Please complete the information below (incomplete applications will not be considered):

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_

PROPERTY \_\_\_\_\_

ADDRESS \_\_\_\_\_

MANAGEMENT/OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

IMMEDIATE SUPERVISOR \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

IMMEDIATE SUPERVISOR'S SIGNATURE

*Signature below represents your supervisor's consent to allow you to attend the program and their support of the statements that you've made herein as being truthful.*

\_\_\_\_\_

**MAIL TO: GCAAEF, Attn: Scholarship Submissions, 6060 Piedmont Row Drive South, Suite 575,  
Charlotte, NC 28287 Deadline: November 15, 2019**

Please check the program you are applying for below. If you need details about the program, please go online at [www.greatercaa.org](http://www.greatercaa.org) and select the Education tab.

- NALP: National Apartment Leasing Professional
- CAM: Certified Apartment Manager
- CAPS: Certified Apartment Portfolio Supervisor
- CAMT: Certificate for Apartment Maintenance Technicians
- CAS: Certified Apartment Supplier

1. How long have you been employed in the multi-family housing industry? \_\_\_\_\_

2. Please list any degrees, designations, licenses or certifications you have:

---

---

3. Please use this space provided to state your career goals:

---

---

4. List any activities you have been involved in the past 12 months that directly relate to community service, GCAA volunteering, and/or GCAA participation:

---

---

5. On a **separate** sheet of paper, please provide a narrative/essay as to why you should be considered as an APT Scholarship recipient. You could write about your commitment to the industry, how you give back, and why you've chosen a career in the apartment industry. Please be specific. **This must be typed.**

---

### GCAAEF APT SCHOLARSHIP AGREEMENT

I, \_\_\_\_\_, do hereby agree that all the above information is true and correct to the best of my knowledge. Additionally, I do hereby acknowledge that I meet the requirements and if I become a scholarship recipient, I am fully responsible for fulfilling the requirements of the designation. Should I default, GCAAEF may require that I reimburse the Scholarship in the full amount of the award. Upon receiving my designation, I agree to *give back* by providing a testimonial regarding my experience and provide service on one GCAA committee for a one-year term. I also acknowledge that I have not been nor will I seek to be reimbursed for this program.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*GCAAEF does not discriminate on the basis of age, race, national origin, sex, religion, color, handicap or familial status.*