



Triangle Apartment Association Education Foundation

2018 NALP Scholarship Application

The Triangle Apartment Association Education Foundation Scholarship Fund will provide a qualifying candidate or candidates the opportunity to receive funds necessary in obtaining the National Apartment Association Education Institute (NAAEI) credential the National Apartment Leasing Professional (NALP). All applicants must hold a valid High School Diploma or equivalent and have at least six months experience as a leasing professional in the apartment industry. ***An incomplete application will not be accepted under any circumstances.***

Careful consideration is given prior to awarding a scholarship with special emphasis placed on an individual's meeting the requirement listed on the application, commitment to the industry and overall character.

Scholarship applications must be received on or before **September 10, 2018**. All information submitted is strictly confidential. **If your management company offers a tuition reimbursement program, you are not eligible for the above scholarship.** The recipient will be notified by **September 25, 2018**.

Please complete the information below.

NAME: _____

HOME ADDRESS: _____

TELEPHONE NUMBER: _____ ALTERNATE PHONE: _____

EMPLOYER: _____ PHONE: _____

WORK ADDRESS: _____

COMMUNITY NAME (IF APPLICABLE): _____

IMMEDIATE SUPERVISOR: _____

1. I am one of the following: Owner/Operator: _____ Associate Member: _____
(Community/Management Co.) (Vendor/Supplier)

2. Would you consider a partial scholarship? Yes _____ No _____

3. One mandatory requirement to be considered as a recipient of the Education Scholarship fund is that you currently and actively participate in one TAA committee or one community service project/fundraiser event with TAA. Please list the name of the committee(s) or service project(s)/fundraiser(s) below:

4. Please state below your career goals.

5. How many TAA education courses/events do you attend a year? 1-3 _____ 3-6 _____
6+ _____

6. Please list any degrees, credentials, licenses, certifications or industry specific, awards and achievements you may hold.

7. If you're not actively involved or participate in any of TAA events, committee(s) or courses, please share as to why.

8. Please list three apartment industry professional references and their contact information:

1. _____

2. _____

3. _____

9. On a separate sheet of paper, briefly explain in 250 words or less why your Employer/Management Company is unable to financially cover the cost of this course.

10. What industry contributions will be attempted to be made after successful completion of this Credential course; and why you should be considered as a NALP scholarship recipient? Please be specific. **This must be typed and attached to the completed application.**

11. **Attach a professional letter of recommendation from your property/company supervisor.**

SCHOLARSHIP AGREEMENT

I, _____, do hereby agree that all of the above information is true and correct to the best of my knowledge. Additionally, I do hereby acknowledge that should I become a scholarship recipient, I am fully responsible for attendance of all classes and any other requirements in obtaining the NALP credential. I understand that should I default; the Triangle Apartment Association Education Foundation will require that I reimburse the Scholarship in the full amount of the award on or before the end of the course.

Signature: _____ Date: _____

The Triangle Apartment Association Education Foundation does not discriminate on the basis of age, race, national origin, sex, religion, color, disability or familial status.

*Return scholarship application by September 10, 2018 to: Triangle Apartment Association
* 7920 ACC Blvd, Suite 220 * Raleigh, NC 27617 or fax: (919) 782 -1169*



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Scholarship Applicant Authorization Form

The applicant below has applied for a NALP Scholarship through the Triangle Apartment Association Education Foundation. The authorization signature below serves as acknowledgement that the individual applying has completed and submitted all paper work necessary to be considered as a possible scholarship recipient. This also serves as authorization from the Applicant's supervisor/manager, that if the applicant is selected as a scholarship recipient, they shall be allowed the time necessary to fulfill all obligations for the duration of the classes and exams.

Authorized Signature of Immediate Supervisor: _____

Supervisor's Title: _____ Date: _____

Applicant's Signature: _____

Applicant's Title: _____ Date: _____

This form is to be signed by applicant and his/her supervisor as part of the completed scholarship packet. Signatures guarantee attendance if the applicant is chosen as a scholarship recipient.

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