



# Upper State Apartment Association Education Scholarship Program Application

The Upper State Apartment Association invites members to participate in the annual **Education Scholarship Program**. Each year, three outstanding apartment industry professionals will receive a full scholarship for an

- 1) Attendance to the SCAA Education + Legislative Conference (registration, hotel, food & gas stipend \$1500 value)
- 2) NAAEI Designation Certified Apartment Leasing Professional, Certified Apartment Manager, or Certified Apartment Maintenance Technician offered by USAA (\$1000 value)
- 3) Professional Development course: Certified Pool Operator, EPA Certification, or Property Management Pre-Licensing Course offered by USAA. (\$500 value)

All applicants must have at least six months experience in the multi-family housing industry and meet designation requirements. All applications will be considered carefully. Particular emphasis will be placed on an individual's commitment to the industry, general industry knowledge, USAA participation and overall character. Scholarship recipients will each receive full tuition to the program they have selected and must complete the program within 12 months of receipt.

**Completed applications must be received by 5pm on 3/15 to be considered for SCAA Conference or Q1/Q2 Education opportunities. Applications for Q3 and Q4 are due 5pm 5/15 and 5pm 8/15 respectively.** Applications that are not selected for the current quarter will remain in the lottery for selection the following quarter, should you choose. All applications will be reviewed anonymously by the USAA Nominating Committee.

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

NAME \_\_\_\_\_

WORK PHONE \_\_\_\_\_ CELL \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

PROPERTY/BUSINESS  
\_\_\_\_\_

SUPERVISOR \_\_\_\_\_

SUPERVISOR'S EMAIL \_\_\_\_\_

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.

SUPERVISOR'S SIGNATURE \_\_\_\_\_

**Check below if you want to keep your application in the lottery for consideration for next quarter's scholarship for 2024.**

Keep my application in the lottery for consideration

**Please check the program you are applying for below**

- SCAA Education + Legislative Conference
- Property Management Pre-Licensing Course
- CALP: Certified Apartment Leasing Professional
- CAM: Certified Apartment Manager
- CAMT: Certified Apartment Maintenance Technician
- CPO: Certified Pool Operator
- EPA Certification



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

\_\_\_\_\_

2. Industry designations, licenses, or certifications:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Describe your career goals:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. On a **separate** document, please provide a paragraph as to why you should be considered for a scholarship. Explain your commitment to the industry, how you give back, and why you've chosen a career in the apartment industry. Please be specific. **For clarity purposes, this must be typed. Please attach with your submission.**

## USAA Education Scholarship Program Agreement

I, \_\_\_\_\_, do hereby agree that the above information, in its entirety, 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, USAA may require that I reimburse the Scholarship in the full amount of the award. I also acknowledge that I have not been nor will I seek to be reimbursed for this program. I understand that should I become ineligible due to unemployment by a member or other circumstances that I forfeit the scholarship, which will then be awarded to the next eligible recipient.

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

Date Received by USAA \_\_\_\_\_

Please email completed application to [joye@upperstate.org](mailto:joye@upperstate.org).

