

SCHOLARSHIP APPLICATION REQUIREMENTS

1. Applicants must be a member, a dependent of a member, an employee of a member firm or a dependent of an employee of a member firm of the HBRA.
2. Two categories of awards will be given each year, one based on merit and the other on financial need. An equal number of scholarships will be awarded in each category.

Applicants applying based on merit must provide a copy of their current transcript showing academic progress and courses taken. During selection, the degree of difficulty of courses taken will be a factor in consideration (i.e. AP courses). All applicants must have a GPA of 3.0 or better.

For applicants applying based on financial need, household income must be below the Median income for the Metropolitan Statistical Area (MSA) as issued by the U.S. Dept. of Housing & Urban Development (HUD). See attached chart or go to www.efanniemae.com/sf/refmaterials/hudmedinc. Applicants must provide last filed tax return for parent/guardian to substantiate household income.

All applicants must provide a written essay detailing their choice of educational institution, intended course of study, extracurricular activities/areas of interest.

3. Applicants must have completed their junior year of high school, or its equivalent, in order to be eligible to apply.
4. Applications will be accepted between January 1 and April 30 of the year in which the scholarship will be awarded. Announcement of the award recipients will be made by June 30 each year.
5. Once an award is made, recipient must supply The Vision Fund, Inc. with proof of matriculation at the educational institution.
6. All payment of awards granted will be made directly to the institution involved for use towards qualified education expenses. Qualified education expenses include tuition & fees and course-related expenses such as books, supplies, and equipment.
7. Scholarships are renewed annually. Each spring, the student must provide to The Vision Fund, Inc., evidence of the following: (1) continued attendance at an eligible educational institution; and (2) satisfactory academic progress (C average or better).
8. Selection of the recipients is to be made by the Scholarship Committee of The Vision Fund, Inc. and their decision will be final. The Scholarship Committee is comprised wholly of individuals totally separate from The Vision Fund, Inc., its organizer, and members of the HBRA. Any dependents or relatives of members of the Vision Fund Board of Directors, Scholarship Committee or substantial contributors are ineligible for scholarship awards.

For 2007, four scholarships will be awarded. Two based on merit and two based on financial need. Scholarship awards will be \$1000 each, renewable for a total of four years (per Item 7 above) for a total scholarship award, per recipient, of \$4000.

The Vision Fund, Inc.

SCHOLARSHIP APPLICATION

Applicant's Name: _____
Last *First* *M.I.*

Birth date: _____ Social Security # _____

Permanent Home Address: _____

Current Mailing Address: _____

Contact Phone/Email: _____

Name & phone # of parent/guardian: _____

Application for scholarship based on: _____merit _____financial need
_____either

Indicate how you heard about the scholarship and how applicant is related to any member or employee of a member firm of the HBRA: _____

Name and Address of educational institution student attends, or plans to attend, which will receive the scholarship payment, if awarded. Also indicate if student has already been accepted by the educational institution.

Education:

School Dates Attended Graduation Date / Degree

Please List Work Experience (If Any):

List any school activities; awards, etc. (include dates of activities, awards, as applicable):

Please list any community service work, hobbies, special interests, etc. that are not school related (include dates of service work):

On a separate sheet of paper, please tell us your reasons for wanting to attend the institution of your choice and your choice of major/area of concentration of study. Also tell us anything else about yourself, your extracurricular activities, accomplishments, interests and experience that you would like us to know.

Please submit this application with the following:

- **Complete, certified transcript of your academic record to date.**
- **Recommendation from professor/counselor familiar with your academic work.**
- **If applying based on financial need, submit a copy most recent year's filed tax return of parent/guardian to substantiate household income.**

I hereby certify that to the best of my knowledge all of the statements and information submitted with this application are correct and complete.

Applicant's Signature

Date

Signature of Parent/Guardian

Date

Please indicate the name and address of your hometown newspaper for use in a press release if you are awarded the scholarship.

Return completed application with accompanying paperwork to:

The Vision Fund, Inc.
433 Meadow Street, Lower Level
Fairfield, CT 06824

Deadline: Applications must be complete & received in our office by April 30th.