



SUPPORTIVE EMPLOYMENT CLIENT SCHOLARSHIP APPLICATION 2024

Directions for this Application: Please type your responses and answer the questions to the best of your ability. Please answer the questions within the allotted word count.

At the end of the document, please sign it electronically and date.

Submission: Send your complete application, transcripts, and letter of recommendation in one email to: scholarship@clmnh.org. The deadline is **March 31, 2024 at 5 pm.**

If you do not have an email, please have your case manager forward your completed application to scholarship@clmnh.org on your behalf.

Our webpage, www.centerforlifemanagement.org/careers/scholarship, offers guidance in eligibility and in completing your submission.

Your application package must include:

- A typed, signed and dated application.
- Either an unofficial/official transcript of the school you are attending or have graduated from.
- If you have graduated from high school, please send either a copy of your final transcript or copy of your diploma.
- If you obtained your GED, please include a copy.
- Proof of acceptance or enrollment into a continuing education, trade program, or course that will support your career growth and assist you in becoming gainfully employed.
- One letter of recommendation from your case manager or supportive employment counselor.
- If you have a resume, please include a copy.
- Your application must be signed by you and your case manager acknowledging acceptance of our release requirements.
- **You must be available to receive your award in person at the assigned date and time at the Center for Life Management, 10 Tsienneto Road, Derry, NH 03038.**



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Name: _____
(first) (last)

Address: _____
(street) (town/state)

Email Address: _____

Cell Phone Number: _____

Date of Birth: _____ Age: _____
(month/day/year)

Year of High School Graduation or Completion of your GED: _____

List the school (complete with address) and program that you have been accepted to: _____

Did you include your acceptance letter from this school or program in your application packet? ____ yes ____ no

If no, please explain. _____

List the type of degree or certificate you are pursuing:

What will you do upon the completion of this program?

List your employment and school experience. (include dates, type of job or role)



Tell us about yourself...

Question 1: Please write a short autobiography including information about your family, work, school experience, community involvement, hobbies, sports or activities, and what you hope to do in the future. (150 words)

Question 2: Please write a personal statement describing your accomplishments and goals with the Supportive Employment Program at CLM. (150 words)

Question 3: Why are you applying for this scholarship? (150 words)

I, _____ have read and understand the qualifications and eligibility of the Center for Life Management Foundation Scholarship Program. I affirm that I plan to pursue a career that meets said requirements and that the information herein is true and accurate to the best of my knowledge and belief. I agree that if I am selected to receive a scholarship award I will permit the Center of Life Management Foundation to publish my photograph and name on their social media sites and in their marketing and press materials.

Name: _____ Signature: _____ Date: _____

Case Manager: _____ Signature: _____ Date: _____