

UPPER DUBLIN TOWNSHIP  
BOARD OF COMMISSIONERS

**NORTH HILLS COMMUNITY EDUCATION GRANT  
SELECTION CRITERIA**

1. Applicant must currently live in Upper Dublin Township and must have been an Upper Dublin resident for at least two (2) years prior to making application.
2. Applicant must live within the boundaries of the North Hills Neighborhood of the Upper Dublin community. Boundaries are defined as Pennsylvania Ave./Mt. Carmel Ave. (south); Chelsea Ave. and Limekiln Pike (east); Jackson Ave. (west) and Beechwood Ave. (north).
3. Applicant must be a high school senior or high school graduate at the time of application. Applicant may be preparing to graduate, have already received their diploma, or have earned a GED from any accredited high school or certified program. Applications are *not* limited to Upper Dublin High School graduates.
4. To be considered for an Education Grant for the coming academic year, this completed application and all attachments must be returned *by June 1<sup>st</sup>* of the current academic year. See pg. 2 for where to submit the application and supporting documents.
5. In order for grant funds to be issued, the applicant's diploma or GED certificate must be submitted.
6. Applicant must use the grant before the end of the calendar year or school year (whichever is greater) in which it is awarded to attend an accredited post-secondary school, trade school or training institute.
7. Grant may be used only for "last dollar expenses." These are any costs related to post-secondary education not already covered by another scholarship, grant or stipend.
8. Grants will be issued directly to the post-secondary school, trade school or training institute on behalf of the awardee and will be available once enrolled.
9. Applicant may apply for and receive this grant more than once. However, no previous recipient will receive a subsequent grant should there be other eligible applicants that have not previously received the grant.
10. Grant amount will be a guaranteed minimum \$500 to a maximum not to exceed \$1,000 per person. The amount awarded in any year will depend on available funds and number of applicants selected to receive the grant. NOTE: If not awarded in any year, the grant amount available will be added to the principle.

Only this application form will be accepted. Applications are available:

- Online > [www.upperdublin.net](http://www.upperdublin.net) > Government > North Hills Community Education Grant
- Pick-up > Upper Dublin Township Building, during normal business hours
- By mail or email, upon request > call (215) 643-1600 x3220 (Jesse Conte) to register your name, mailing address and/or email address, and telephone number.

**UPPER DUBLIN TOWNSHIP BOARD OF COMMISSIONERS  
NORTH HILLS COMMUNITY EDUCATION GRANT  
APPLICATION**

Please type all information.

**A. APPLICANT:**

1. Name: \_\_\_\_\_

2. Address: Street: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

3. Phone: \_\_\_\_\_

4. How long have you lived in Upper Dublin? \_\_\_\_\_

5. High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

*\*Please attach one copy of your transcript to this application.*

6. Extracurricular activities: \_\_\_\_\_  
\_\_\_\_\_

*\*Please attach additional sheets if necessary.*

7. Honors/Awards received: \_\_\_\_\_  
\_\_\_\_\_

*\*Please attach additional sheets if necessary.*

8. Military Service Unit (if applicable): \_\_\_\_\_ Dates: \_\_\_\_\_

*\*Please attach a copy of your discharge papers.*

9. Military Honors/Awards received: \_\_\_\_\_  
\_\_\_\_\_

*\*Please attach additional sheets if necessary.*

**B. COLLEGE / SCHOOL / INSTITUTE you currently attend or to which you have been accepted and will enroll:**

1. Name: \_\_\_\_\_

2. Address: Street: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

3. Bursar's Office/Financial Aid Office Phone: \_\_\_\_\_

**C. REFERENCES:** Two required (not family members). Please list on page 2 of this form

**D. WRITING SAMPLE:** Attach an essay describing, "How Continuing My Education Can Benefit My Community."

- "Community" may be interpreted as narrowly or as broadly as you see appropriate and relevant.
- This essay is limited to 200 words, typed and double-spaced.

*I wish to be considered for the Upper Dublin Board of Commissioners North Hills Community Education Grant.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

**UPPER DUBLIN TOWNSHIP BOARD OF COMMISSIONERS  
NORTH HILLS COMMUNITY EDUCATION GRANT**

**REFERENCES**

NAME	ADDRESS	TELEPHONE	RELATIONSHIP TO APPLICANT

To be considered for an Education Grant for the coming academic year, this completed application and all attachments must be returned *by June 1<sup>st</sup>* of the current academic year to:

**MAIL / DROP-OFF TO:** North Hills Community Education Grant  
c/o Mr. Kurt Ferguson, Township Manager  
Upper Dublin Township  
370 Commerce Drive  
Fort Washington, PA 19034

OR

**EMAIL TO\*:** Jesse Conte at [jconte@upperdublin.net](mailto:jconte@upperdublin.net)

**\*Email Instructions:** Please save your application and any other documentation as PDF format and attach to your email. Subject line MUST include "NHCEG Application". A confirmation will be sent within three (3) business days of receipt of your application. If you do not receive a confirmation email by this time, please call Jesse Conte at 215-643-1600 ext. 3220 to inquire.

**Questions regarding this application?**

Contact the Upper Dublin Township Manager's Office at (215) 643-1600 x3220

**SCHOLARSHIP COMMITTEE USE ONLY:**

Date received: \_\_\_\_\_ Application complete:  Transcript  
 N/A Military Service Discharge Papers  
 Diploma recv'd \_\_\_\_\_  
 References  
 Writing Sample  
 Other:

Date considered: \_\_\_\_\_ Awarded: YES NO  
Comments:

Applicant notified by letter: YES date: \_\_\_\_\_ by: \_\_\_\_\_  
Applicant response received: YES date: \_\_\_\_\_ by: \_\_\_\_\_  
Funds dispensed and mailed? YES date: \_\_\_\_\_ by: \_\_\_\_\_