



# Central Florida Higher Education Alliance

[www.cfhea.net](http://www.cfhea.net)

Central Florida Higher Education Alliance  
Increasing Awareness of Higher Education Opportunities in Central Florida

## New Student Scholarship

### Scholarship Requirements:

- School of choice must be a CFHEA Member. For a list of schools visit: [www.cfhea.net](http://www.cfhea.net)
- One letter of recommendation from employer.
- Applicant must provide evidence of acceptance before scholarship funds can be awarded.
- Scholarship will be paid to the recipient.
- Scholarship recipient will need to provide CFHEA with an academic and professional update six months from the date of awarded scholarship.
- Scholarship is a one-time award.

**Two \$500 Scholarships awarded each year. See deadlines below.**

Submit to CFHEA board a double spaced typed statement: minimum of 1 page and maximum of two pages answering the following questions:

What are your current educational and professional goals and objectives?

How has higher education made an impact in your life?

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Check which period you intend to apply for:

January through May 2018: deadline April 15, 2018

June through December 2018: deadline November 15, 2018

Send completed scholarship packet no later than the deadline to the following address:

CENTRAL FLORIDA HIGHER EDUCATION ALLIANCE  
P.O. Box 161631  
Altamonte Springs, FL 32716-0518



# Central Florida Higher Education Alliance

CFHEA Event: \_\_\_\_\_

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

[www.cfhea.net](http://www.cfhea.net)

The Central Florida Higher Education Alliance  
Increasing Awareness of Higher Education Opportunities in Central Florida

## New Student Scholarship

\_\_\_\_\_  
Last Name First Name MI

\_\_\_\_\_  
Mailing Address City St. Zip Code

\_\_\_\_\_  
Home Address (if different from mailing address) Date of birth

\_\_\_\_\_  
Email Address Phone Number

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### Employment and Educational Information:

CFHEA Member School you plan to attend? \_\_\_\_\_ Degree \_\_\_\_\_

Are you a current student? \_\_\_\_\_ If yes, what institution? \_\_\_\_\_

Employer? \_\_\_\_\_

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### STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my name, picture and college may be included in CFHEA press releases or other media.

Signature of scholarship applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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