

**ST. PETERSBURG COLLEGE
ST. VINCENT DE PAUL SUBSTANCE ABUSE
AND PREVENTION GRANT**

APPLICATION DEADLINE: May 14, 2010 for Session I (Fall 2010)
 September 10, 2010 for Session II (2011)

APPLICANT'S NAME: _____ **SPC Student ID#:** _____

Grant Types:

Grants are available to students majoring in Human Service's ALCOHOL/SUBSTANCE ABUSE track:

1. Associate Degree in Human Services – Alcohol/Substance Abuse option (HSM-AS)
2. Associate Addiction Professional Applied Technology Diploma (AAP-ATD)

Grant Eligibility Criteria:

1. Students must be enrolled in at least six (6) credit hours per semester for Sessions I (Fall) and II (Spring).
2. Students must maintain a minimum GPA of 2.5 overall.
3. Students must intend to become employed full-time in the field of Alcohol/Substance Abuse immediately following their graduation/completion of academic requirements AND must complete the certification requirements for Certified Addiction Professional (CAP), Certified Addiction Counselor (CAC) or Certified Addiction Specialist (CAS).
4. Students must apply for Federal and State financial aid yearly. Students must demonstrate financial need based upon their Federal financial aid determination. Students must not be in default on any outstanding student loans.
5. Applicant must be available, **in person**, for the interview which is scheduled 2-4 weeks after the application deadline.
6. Students must agree to complete a minimum of 48 hours of volunteer experience for each semester in which they receive grant funding at the St. Vincent de Paul District Office Operations in St. Petersburg (i.e., thrift store, food center, or the administrative offices).

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- A maximum of four (4) students will be selected to receive scholarships in each of the fall and spring sessions (a total of up to 8 new scholarship recipients per academic year).
 - Scholarships are awarded for a **single semester**. Scholarship awardees may **re-apply** for grant funding as long as the above eligibility criteria have been met. Scholarship awardees who submit a request for continued grant funding will be included in the pool of applicants to be interviewed for the next session for which they apply.
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Do you perform any other community service? Yes_____ No_____

- hours per week _____ or month _____.
- Agency/Location _____

- Type of service _____

1. _____
 APPLICANT NAME _____ SS# _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Home Telephone Number _____ Work Telephone Number _____ Birth Date _____

2. Please indicate the type of program you are interested in:

- _____ Associate Degree in Human Services – Alcohol/Substance Abuse option (HSM-AS)
- _____ Associate Addiction Professional Applied Technology Diploma (AAP-ATD)

****Note:** The amount of grant you may receive will be based upon your financial need and availability of funds.

Projected Graduation Date: _____
 Month Year

3. Please provide the following academic information:

High School Diploma? _____ Yes _____ No GED? _____ Yes _____ No

List any Degrees or Certificates Presently Held _____

Institution Degree/Certificate Received From: _____

Graduation Date: _____ GPA: _____

Names of any other Universities or Colleges you have attended: _____

Date Attended: _____ GPA: _____

Have you ever attended SPC? _____ Student ID# _____

Total number of semester hours: _____

Present grade point average (GPA) at SPC: _____

Total number of semester hours enrolled-current semester: _____

4. Please tell us what your career plans are following graduation:

5. Please provide the following information regarding financial aid:

Have you applied for financial aid? _____ Yes _____ No

If yes, when did you last apply for financial aid? _____

Are you presently receiving financial aid? _____ Yes _____ No

Are you in default on any student loans? _____ Yes _____ No

Please specify the type(s) of financial aid you are presently receiving or you have been determined eligible to receive?

_____	\$ _____	_____
Type of Financial Aid	Amount	Date Received
_____	\$ _____	_____
Type of Financial Aid	Amount	Date Received

6. Please provide the following demographic information:

Annual amount of household income **last year** (gross): \$ _____
(Income you have **after** taxes) (net) \$ _____

What are the sources of present household income?

Self _____ Spouse _____ Other _____

Number of dependents: _____

7. Please **attach** a letter of 100 to 200 words, which explains why you are in financial need.

8. Please **attach** a copy of your most current resume or provide a work history for the last five (5) years.

9. Please submit two (2) reference letters: one **personal** (i.e.: friend or relative) and one **professional** (i.e.: employer, clergy, business associate, etc.)

10. Are you in recovery? _____ Yes _____ No

11. Please write a statement explaining your future goals and the reasons why you feel that you are the best candidate for this grant opportunity. (you may also attach a statement)

12. If you are currently a student at SPC, please tell us about your academic achievements:

In addition, if you are accepted for this grant, you will be expected to be willing to:

- abide by any requirements of this grant including due dates and submission of required information,
- abide by the Board of Trustee Rules of St. Petersburg College,
- attend classes and complete assignments as required,
- allow instructors to share your class progress with Grant Coordinator, St. Vincent de Paul and the Selection Committee,
- contact your mentor weekly,
- to complete the required hours of community service hours at the St. Vincent de Paul Storefront Center,
- to complete any task asked of you by the St. Vincent de Paul Storefront Staff while doing your service hours, except for illegal, immoral or unethical actions,
- to conduct yourself in a proper manner including, but not limited to, the violation of student responsibilities in DBT Rule 6Hx23-4.33 (*STUDENT AND STUDENT ORGANIZATION REGULATIONS*) and dress appropriately, and
- refrain from using profane language while performing your community service hours.

The SPC Foundation requests that all recipients of this Grant thank the donor for the help they have received in attending SPC. Notes, cards or personal letters are acceptable and an address will be provided at a later date. Attendance at the annual scholarship/grant luncheon is required.

I certify that all statements made on this application are true and correct.

I authorize a full background check and release of any information necessary from any person without liability to the person releasing the information or to the Selection Committee and/or College for any consideration to the Selection Committee and/or College.

Signature: _____ Date: _____

Reminder: Please review your application for completeness before submitting it.

Send to:

Cheryl Kerr, Ed.D., LMHC
Human Services Program
Health Education Center - SPC
P. O. Box 13489
St. Petersburg, FL 33733

St. Petersburg College is dedicated to the concept of equal opportunity. The college will not discriminate on the basis of race, color, religion, sex, age, national origin or marital status, or against any qualified individual with disabilities, in its employment practices or in the admission and treatment of students. Recognizing that sexual harassment constitutes discrimination on the basis of sex and violates this rule, the college will not tolerate such conduct. Should you experience such behavior, please contact the director of EA/EO at (727) 341-3257 or (727) 341-3261 or by mail at PO Box 13489, St. Petersburg FL 33733-3489.