



National CAPACD
Scholarship Application
For NeighborWorks® America Training Institute
New Orleans, Louisiana – March 1-5, 2010
DEADLINE: Tuesday, December 22, 2009



SCHOLARSHIP

National CAPACD and NeighborWorks® America, through the George Knight Scholarship Program are offering a limited number of **full tuition and single-room lodging scholarships** to National CAPACD members to attend up to 5 days of **training** at the upcoming **NeighborWorks® Training Institute in New Orleans, Louisiana from March 1-5, 2010**.

The scholarship does NOT include travel, incidentals, and most meals. *Continental breakfast and morning and afternoon beverages are served each day. Hot and cold hor d'oeuvres will be served at the networking reception. All other meals are at your own expense.*

WHO SHOULD APPLY

This is an opportunity for community organizations to develop or strengthen their capacity to address the ongoing foreclosure crisis. Therefore, **scholarship applicants are required at least one foreclosure-related course**. These trainings can be useful for the **development of a foreclosure counseling program**, or for the **broadening of existing translation services**.

Staff at National CAPACD paid member organizations and paid Individual members of National CAPACD are eligible for this scholarship. *If you are interested in becoming a member of National CAPACD, please visit our website for a membership application at <http://www.nationalcapacd.org>.*

HOW TO APPLY

Please complete the attached application and fax to (202) 223-4144 or email to hieu@nationalcapacd.org by **Tuesday, December 22nd**.

Please include the following with your application:

1. A statement of less than 250 words describing how you anticipate the training will help your organization strengthen their capacity to respond to the current foreclosure crisis.
2. If applicable, list your attendance to previous NTI trainings, including the courses taken and any certifications achieved. If you are in the process of working towards a NW certification, please list here along with any courses you have taken towards that certification.
3. Resume.

*Award selections will be made by National CAPACD to ensure geographic diversity and will be announced in early December. NeighborWorks America will directly send all awardees an event scholarship award and a confirmation packet. The packet will include the event logistical information, your hotel reservation and confirmed courses. All awardees must provide a **\$100 refundable check deposit** made out to National CAPACD to secure their place in the upcoming NeighborWorks® Training Institute along with this application. The deposit will be refunded by National CAPACD upon attendance of the Training Institute in Washington, DC from March 1-5, 2010. No refund will be issued to those who do not attend the Institute.*

Incomplete applications will not be considered. Scholarship awards are non-transferable to other individuals or from one event to another.

About National CAPACD: National CAPACD is the first national advocacy organization dedicated to addressing the community development, organizing and advocacy needs of the diverse and rapidly growing AAPI communities nationwide. Our mission is to be a powerful voice for the unique community development needs of AAPI communities and to strengthen the capacity of community based organizations to create neighborhoods of hope and opportunity. (www.nationalcapacd.org)

Please contact Hieu Truong at (202) 223-2442 or hieu@nationalcapacd.org with any questions. We will send an email to confirm receipt of your completed application.



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Mr. Ms. First _____ Last _____ Date _____

Organization _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

MEMBERSHIP

My organization is a current member. Enclosed is my membership form & dues.

Organization Founding Date: _____ Operating Budget: _____

TYPE OF APPLICANT/ORGANIZATION (check only one)

Government Agency Social Services (nonprofit)

Municipality Community-based Development Organization

Tribal Government Housing Finance Agency

Tribal nonprofit Financial Institution (lending, brokerage, etc.)

Volunteer (name of organization e.g. AmeriCorps) _____

College/University Student (name of school) _____

Other _____

YOUR RACE/ETHNICITY (please specify)

Asian _____ Native Hawaiian/Pacific Islander _____

White Hispanic/Latino Black/African-American American Indian/Alaskan Native

Other _____

ACCOMODATION INFORMATION

Free single-room requested No room requested Smoking room requested (can **not** be guaranteed)

Please plan to arrive the day before your first class begins and leave the day your last class ends (courses end at 4:00p.m. each day, except for Friday when courses end at 2:30p.m.)

COURSES REQUESTED (please visit <http://www.nw.org/training> for the full listing of courses)

Use course letters and numbers. Please include second choice courses in case your first-choice courses are full.

	Mon & Tues	Wed.	Thurs & Fri
First choice	<input type="text"/>	<input type="text"/>	<input type="text"/>
Second choice	<input type="text"/>	<input type="text"/>	<input type="text"/>

SPECIAL NEEDS

If you have special needs, including those addressed by the Americans with Disabilities Act, please specify: _____

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2009

I affirm that all of the above statements are true to the best of my knowledge.

_____ Your Signature

I affirm this application is submitted with my consent.

_____ Supervisor Signature