

Dear Applicant:

Thank you for your interest in the Helena Rubinstein Continuing Education Scholarship Fund for Career Advancement. This scholarship fund, which is generously supported by the Helena Rubinstein Foundation, is the first such program at CUNY that is just for individuals enrolling in continuing education programs. It is open to individuals who seek to advance their careers through education and training, and who do not have access to other sources of funding that can pay for tuition and fees. Scholarship applicants may also be individuals who are unemployed or seeking a career change.

Certificate Program Scholarship

- Covers up to 90% of tuition for full certificate programs
- Scholarship package includes invitation to special events for scholarship recipients and access to resources, such as webinars, career maps, and other support services
- Awarded to up to 10 Continuing Education students at CUNY each year
- Awards are made for programs that prepare individuals for jobs where there are currently open positions, and/or where it is projected there will be open positions in the near future

Single Course Scholarship

- Covers up to 90% of tuition for one course

These scholarships are intended to support career advancement for individuals. While exceptions may be made, particularly for those educated in other countries, scholarship awards are *not* generally given to those who have earned more than 60 college credits and/or an associate or bachelor's degree.

Scholarships are paid directly to the college where the student is enrolled. Scholarships *do not* cover the costs of books, materials, equipment or other course-related expenses.

Students interested in the Scholarship Fund are required to meet with a Scholarship Liaison at the college where they are enrolled in order to complete an application, which includes:

- A cover sheet signed by you and the Dean or Director of continuing education at the college where you plan to enroll
- An application form
- A personal essay of up to two pages
- A copy of a pay stub from your place of employment, dated within the past three months, or proof of unemployment
- An additional page filled out by the college, if you are applying for a Certificate Program Scholarship
- A letter of recommendation from a current or former work supervisor is not required, but may also be included with your application

Upcoming 2012 Deadlines:

Friday, January 20, 2012 — for spring 2012 courses

Friday, May 18, 2012 — for summer 2012 courses

The college should mail or email completed applications to:

Rachel Stephenson
Office of Academic Affairs
City University of New York
16 Court Street, Room 3209
Brooklyn, NY 11241
rachel.stephenson@mail.cuny.edu



Office of Continuing and Professional Education
CITY UNIVERSITY OF NEW YORK
Helena Rubinstein Continuing Education Scholarship Fund for Career Advancement

COVER PAGE

Name of applicant: _____

College: _____

Applicant's Signature:

I, _____, certify that I have read and understood all instructions accompanying and have answered all questions truthfully and to the best of my knowledge. I understand that any misrepresentation or omission may be cause for rejection of my scholarship application.

Signature of Applicant

Date

Dean or Director's Signature:

I, _____, certify that this application has been reviewed by my office and that this applicant is deemed to be both financially in need of scholarship support, and to be seeking enrollment in a course that will support his or her career advancement.

Signature of Dean or Director of Continuing Education

Date



**Office of Continuing and Professional Education
CITY UNIVERSITY OF NEW YORK
Helena Rubinstein Continuing Education Scholarship Fund for Career Advancement**

APPLICATION

PLEASE TYPE OR PRINT IN INK

PERSONAL INFORMATION

Last Name: _____ First Name: _____

Date of Birth: _____

Permanent home address: _____ Apt # _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email address: _____

Gender: Male / Female *(please circle selection)*

Ethnic Identity (optional): *(check all that apply)*

- Black/African American (Non-Hispanic)
- Hispanic/Latino
- White/Caucasian (Non-Hispanic)
- Native American or Alaskan Native
- Asian/Pacific Islander
- Other (please specify) _____

PRESENT EMPLOYMENT

Organization Name: _____

Organization Address: _____

City: _____ State: _____ Zip Code: _____

Current Job Title: _____

Work Address (if different): _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____

Work Fax: _____

Work E-mail: _____

Description of Duties: _____

EDUCATIONAL BACKGROUND

Do you have a High School Diploma? _____ If yes, year received? _____

Do you have a GED? _____ If yes, year received? _____

Please list in chronological order any training and/or colleges you attended or are currently attending:

Dates	College/Institution	Degree Granted (or expected)	Academic Major	Total Credits Earned (if any)

Have you attended school outside of the United States? (If yes, please explain and provide school name, location, type of education, and dates attended)

PROPOSED CERTIFICATE PROGRAM / SINGLE COURSE

I am applying for: Certificate Program Scholarship / Single Course Scholarship *(please circle selection)*

Certificate Name / Course Name: _____

College offering course: _____

Proposed Course Start Date: _____

Tuition cost: _____ Cost of registration or other fees: _____

FOR CERTIFICATE PROGRAM SCHOLARSHIP APPLICANTS:

Have you previously enrolled in other courses within the certificate? Yes / No *(please circle selection)*

Please list the courses in the certificate program below and indicate which, if any, courses you've already taken:

FOR SINGLE COURSE SCHOLARSHIP APPLICANTS:

Please provide a brief description of the course: _____

Scholarship amount requested (up to 90% of tuition cost): \$ _____

Amount you propose to pay toward tuition and fees (this may include tuition you have already paid for related courses):
\$ _____

Helena Rubinstein Continuing Education Scholarship Fund for Career Advancement

Print Name: _____

INFORMATION RELEASE FORM

The purpose of the Family Educational Rights and Privacy Act (FERPA) is to protect the privacy of information concerning individual students by placing certain restrictions on the disclosure of information contained in a student's university records. I understand that I have the right not to consent to the release of my educational records and I have the right to receive a copy of such records upon request.

Should I be awarded a scholarship, I, the undersigned, hereby authorize the City University of New York to release the following educational records and information to personnel of the Helena Rubinstein Foundation, 477 Madison Avenue, New York, NY 10022:

1. My name and demographic information contained in the application for the scholarship, such as my age, gender and ethnicity.
2. Information regarding the course to which my scholarship is applied, and confirmation that I enroll in and complete the course.

This information may be released for the purpose of providing information about scholarship recipients and continuing education coursework undertaken with support from the Foundation.

I understand that it will be necessary to send a written request to revoke this authorization.

Signed: _____ Date: _____

PHOTOGRAPH AND QUOTATION RELEASE FORM

I, _____, hereby give my consent and authorize the City University of New York, to take and disseminate my photograph and quotes and to release appropriate identifying information in marketing the Helena Rubinstein Continuing Education Scholarship Fund for Career Advancement. I understand that these materials and identifying information will be used to promote public awareness of this scholarship opportunity for prospective continuing education students.

Please check which options you are comfortable with in reference to the use of your photograph and quotes:

- a) _____ the CUNY website on the Internet and other Internet advertising as appropriate ONLY (i.e. "a" and not "b")
- b) _____ print advertising, e.g. brochures, newspapers, magazines, newsletters ONLY (i.e. "b" and not "a")
- c) _____ I agree to both "a" and "b"

Signed: _____ Date: _____

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**COLLEGE APPLICATION SUPPLEMENT
(for certificate program scholarship applicants only)**

Directions: This application supplement must be filled out by the college endorsing the named scholarship applicant. Preference in granting these scholarships will be given to certificate programs that address specific labor-market demands. Please indicate if the information requested is not available.

Name of applicant: _____

College: _____

Certificate Program Name: _____

CERTIFICATE PROGRAM INFORMATION & OUTCOMES

Hours of certificate program: _____

Certification received upon completion: _____

Certifying body affiliated with program: _____

License #: _____

How many students enrolled in this program during the last calendar year? _____

How many students completed this program during the last calendar year? _____

Approximately how many program graduates have found employment in a related field during the last calendar year?

What is the source of this employment data? _____

Does the program include an internship or other work experience? Yes / No *(please circle selection)*

If so, could you describe the internship? _____

Does the program have any employer partners? Yes / No *(please circle selection)*

If so, could you describe the role of your employer partners? Have they informed program design, provided internship sites, hired program graduates, or all of the above?
