

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly.

Application postmark deadline December 2

FOR
SCHOLARSHIP
AMERICA
USE ONLY

I.D. #	PD	GPA	TOTAL

EMPLOYEE
APPLICANT
DATA

Last Name _____ First _____ Middle Initial _____

Permanent Home _____

Mailing Address _____ Apartment # _____

City _____ State _____ ZIP Code _____

Phone (_____) _____ Date of Birth: Month _____ Day _____ Year _____

Employee ID Number _____ Email Address _____
(required for notification)

Date of Hire: Month _____ Day _____ Year _____ Work Phone (_____) _____

Job Title _____ Division _____

Please indicate your status. (Optional, for statistical purposes only) Male Female

American Indian/Alaska Native Black/African American Multi-Racial White

Asian Hispanic/Latino Native Hawaiian/Pacific Islander

POST-
SECONDARY
SCHOOL
DATA

Name of postsecondary school you plan to attend. *Use official school name. Do not use abbreviations.*

_____ City _____ State _____

4 yr. College or University 2 yr. Community or Junior College Other, explain _____

Student standing in school as of the beginning of the scholarship year:

Freshman Sophomore Junior Senior or Graduate Study

Total credit hours expected to complete during this scholarship year: _____

I plan to attend the following terms during the 2020 scholarship cycle (check all that apply): Spring Summer Fall

Combined estimate for tuition, eligible fees, and books for term(s) indicated above \$ _____

REQUIRED: Attach list of intended coursework by term(s). Please include course name, number and number of credit hours and indicate if the course is elective or required toward your degree program. Courses must meet criteria as outlined in Horace Mann's Employee College Scholarship Policy.

Major or course of study _____ Expected college graduation date: Month _____ Year _____

This program of study is: Business-related (Accounting, Business, Communications, IT)

Not business-related but the class(es) are directly related to my current position.

Degree sought: Master's Bachelor's Associate Other _____

TRANSCRIPT
INFORMATION

A complete transcript of all graduate school, college, vo-tech, and/or high school grades attained **must** be sent with this application. Grade reports are not acceptable. Online transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken.

NOTE:
Maximum
award for
scholarship
cycle is
\$5,000

Horace Mann Employee Last Name _____ First _____

Sending a resumé does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

EMPLOYMENT HISTORY

Describe your employment history during the **past five years** (e.g., office work, professional work, consulting work). Indicate dates of employment for each job and approximate **number of hours worked** each week.

Employer/Position	From - Mo/Yr	To - Mo/Yr	Hours per Week

GOALS AND OBJECTIVES

Make a brief statement or summary of your career goals and how your academic plan is business or job related.

MANAGER CERTIFICATION (REQUIRED)

This section is to be completed by the Horace Mann manager/supervisor. Please return to employee when finished.

- I have reviewed the employee's education plans and support his/her participation.
- I have reviewed the employee's education plans, am unable to support his/her participation, and have discussed this with the employee and HR.

If student checked "Not business-related" degree for the program of study on page one, please indicate how class(es) will directly benefit the employee in his/her current position.

Immediate Manager Signature _____ Printed name _____ Title _____

DIVISION HEAD SIGNATURE (REQUIRED)

Division Head Signature _____ Printed name _____

APPLICATION CHECKLIST

The student is responsible for submitting all materials to Scholarship America on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:

- Student Application
- List of intended coursework by term(s)

All materials, including transcript, must be addressed to:

Horace Mann Employee College Scholarship Program
 Scholarship America – Mike Masberg
 One Scholarship Way
 Saint Peter, MN 56082

Postmark deadline December 2

CERTIFICATION (REQUIRED)

Horace Mann and Scholarship America have the responsibility for selecting recipients based on criteria as set forth in the program's description. This application becomes the property of Scholarship America. (It is recommended you keep a copy for your files.)

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. I understand information from my application may be shared with Horace Mann. If requested, I will provide proof of information, including an official transcript of grades. Falsification of information may result in termination of any award granted. If selected as a recipient, I agree to abide by and sign the Horace Mann Employee Certification and Payback Agreement.

Employee's Signature _____ Date _____