

# MAYOR HOPKINS SCHOLARSHIP PROGRAM

## Application 2022- 2023

The Mayor Hopkins Scholarship Program is designed to aid students of low and moderate-income families to attend college, as well as vocational and technical schools. This local and innovative program is funded through Cranston's Community Development Block Grant (CDBG).

Any Cranston resident planning to attend an accredited public or private, vocational school, or four year institution, is eligible for scholarship consideration provided the student's family (or the student if he or she is self-supporting) meets the income criteria set forth below.

Applicant's Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ Social Security No. \_\_\_\_/\_\_\_\_/\_\_\_\_

How long a resident at this address \_\_\_\_ Year(s)      Date of Birth \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Parents' Name(s) \_\_\_\_\_ Parent(s) Address \_\_\_\_\_

Guardian(s) Name \_\_\_\_\_ Address \_\_\_\_\_

Total Family Income \$ \_\_\_\_\_ Number of People in the Family \_\_\_\_\_

**If applicant's address is different from parents', proof of residency must be submitted (i.e., lease agreement, notarized letter from landlord, etc.)**

### **ALL SCHOLARSHIP APPLICANTS ARE REQUIRED TO SUBMIT THE FOLLOWING:**

- **A COPY OF PARENTS' AND APPLICANT'S 2021 FEDERAL AND STATE INCOME TAX RETURN COMPLETE AND SIGNED**
- **COPY OF APPLICANT'S BIRTH CERTIFICATE**
- **TRANSCRIPT FROM ATTENDING HIGH SCHOOL**

### ELIGIBILITY

The student's family gross income, or the student's gross income, if he or she is not dependent on parents, must not exceed the following amount, depending on household size.

<b>FAMILY SIZE</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>
<b>INCOME</b>	<b>\$54,150</b>	<b>\$61,900</b>	<b>\$69,650</b>	<b>\$77,350</b>	<b>\$83,550</b>	<b>\$89,750</b>	<b>\$95,950</b>	<b>\$102,150</b>

Name and Address of School you are attending currently.

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Guidance Counselor: \_\_\_\_\_

Applicant's Academic Class Rank: \_\_\_\_\_

Number of Students in Graduating Class: \_\_\_\_\_

List any clubs, organizations, extra curricular activities or part time employment in which you have participated:

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**Name, Address, Telephone number and Fax number of College you will be attending in September 2022.**

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Explain any particular family circumstances you feel the Scholarship Committee should be aware of:

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I hereby affirm that the information contained herein is true and accurate.

Parent (s) Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicants  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Applications deadline:**

**Return completed application to:**

**Cranston Community Development  
Attn: Laura-Jean Ferranti  
35 Sockanosset Cross Road  
Unit #6  
Cranston, RI 02920**

**NEW OPTIONAL SECTION – RACIAL IDENTITY**

By Federal regulation, the City of Cranston is required to maintain a tally of recipients of aid under the Community Development Program according to racial group and ethnic origin. Although you are not required to fill out the information, this section is optional and will not affect your eligibility; your participation would be greatly appreciated.

Please check the racial group you believe you belong to:

- White** \_\_\_\_\_
- Black/African American** \_\_\_\_\_
- Asian** \_\_\_\_\_
- American Indian/Alaskan Native** \_\_\_\_\_
- Native Hawaiian/Other Pacific Islander** \_\_\_\_\_
- American Indian/Alaskan Native & White** \_\_\_\_\_
- Asian & White** \_\_\_\_\_
- Black/African American & White** \_\_\_\_\_
- Am. Indian/Alaskan Native & Black/African Am.** \_\_\_\_\_
- Other Multi-Racial** \_\_\_\_\_
- Black/Hispanic** \_\_\_\_\_
- White/Hispanic** \_\_\_\_\_

**RELEASE AUTHORIZATION FOR FINANCIAL INFORMATION**

I (we) the undersigned understand in applying for this scholarship, it is necessary that appropriate financial information be obtained. I (we) hereby authorize the Rhode Island Higher Education Assistance Authority to release **FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA)** information to the Cranston Community Development Office.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Parent (s) \_\_\_\_\_ Date \_\_\_\_\_

Guardian \_\_\_\_\_ Date \_\_\_\_\_

## **SCHOLARSHIP PROGRAM RULES AND PROCEDURES**

The Mayor's Scholarship Program is funded through Cranston's Community Development Block Grant. These are federal funds appropriated by Congress and granted to the city through the U.S. Department of Housing and Urban Development. All monies spent under this program must primarily benefit low and moderate-income persons and families. Thus, the city must make awards based on family income limits set by H.U.D. Because the grant is made to Cranston to benefit residents of this city, scholarship recipients must be and remain legal residents of Cranston.

Since the inception of its scholarship aid program, Cranston has appropriated nearly a half million dollars to help in excess of 900 students through college. In 2021/2022, the number of students accepted into the program was 17.

- Students admitted into a four-year program are eligible to receive \$1,000 per year, for a total scholarship of \$4,000.00.

### **CHECKS ARE MADE PAYABLE TO BOTH THE RECIPIENT AND THE SCHOOL**

One check and only one check will be issued and sent to your school for each academic year. For the 2022-2023 school year, checks will be mailed to your school sometime the end of November for all sophomores, juniors and seniors. Checks will be sent to University and Colleges directly on behalf of student. Scholarship funds are to be credited only toward tuition. Checks for freshmen will be mailed to the school in February of the year following matriculation. Freshmen checks will not be mailed until the month of February after the Community Development office has received a first semester transcript.

To remain eligible, all returning students must submit semester grades and a renewal form to the Office of Community Development prior to the deadline of May 27, 2022. Renewal forms will be mailed out from the Community Development Office in April.

To be renewed, you must:

- Be a legal resident of Cranston. Standard identification with a Cranston address will suffice. In the case of students living out of town or out of state at school a Cranston voting registration will constitute residence.
- You must be in good standing at the school and have maintained a minimum 2.0 cumulative average. Semester grades must be submitted to the City of Cranston, Community Development, 35 Sockanosset Crossroad, Unit #6, Cranston, RI 02920, Attn: Laura-Jean Ferranti
- Your family income must remain within the limits set by the U.S. Department of Housing and Urban Development.

### **PLEASE NOTE: SCHOLARSHIP CHECKS WILL BE ISSUED WHEN GRADES AND VERIFICATION OF ENROLLMENT ARE RECEIVED.**

For good cause, a student will be granted up to two (2) semesters' leave of absence, in any one (1) full year. Such a request must be made to the Director of Community Development along with appropriate evidence that the college or university has granted the leave.

### **FAILURE TO OBSERVE ALL RULES CAN LEAD TO FORFEITURE OF AID.**

**Effective March 2022**



**CITY OF CRANSTON**  
**Department of Community Development**

**INCOME CERTIFICATION FORM**  
**USE ONLY JULY 1, 2022 - JUNE 30, 2023**

**Household assisted by a CDBG-Funded Activity**

**Income Limits required by the U.S. Dept. of Housing & Urban Development – Please circle only the one box that corresponds to your total household income. Do not circle an entire column.**

**Income Limits Effective April 1, 2021**

INCOME LEVEL	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PERSON	8 PERSON
	0 - 18,200	0- 20,800	0 - 23,400	0- 26,500	0- 31,040	0- 35,580	0- 40,120	0- 44,660
	18,201- 30,300	20,801- 34,600	23,401- 38,950	26,501- 43,250	31,041- 46,750	35,581- 50,200	40,121- 53,650	44,661- 57,100
	30,301- 48,450	34,601- 55,400	38,951- 62,300	43,251- 69,200	46,751- 74,750	50,201- 80,300	53,651- 85,850	57,101- 91,350
	48,451 - or more	55,401- - or more	62,301 - or more	69,201 - or more	74,751- or more	80,301- or more	85,851 - or more	91,351- or more

**Ethnicity:** (select one only)     Hispanic or Latino     Not Hispanic or Latino

**Race:** (select one or more)

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|---|--|
| <input type="checkbox"/> White                                  | <input type="checkbox"/> Asian & White                                 |
| <input type="checkbox"/> Black /African American                | <input type="checkbox"/> Black/African American & White                |
| <input type="checkbox"/> Asian                                  | <input type="checkbox"/> Am. Indian/Alaskan Native & Black/African Am. |
| <input type="checkbox"/> American Indian/Alaskan Native         | <input type="checkbox"/> Other Multi-Racial                            |
| <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | <input type="checkbox"/> Black/Hispanic                                |
| <input type="checkbox"/> American Indian/Alaskan Native & White | <input type="checkbox"/> White/Hispanic                                |

**Other:** (select all that apply)

- Handicapped or Disabled  
 Female Head of Household  
 Elderly (62 or over)  
 Minors (up to age 18)

Applicants' Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

**If client is below 18 years of age, the parent or legal guardian must verify income and sign the form.**

I certify, under the penalties of law, this income information is correct, and I understand that the information I have provided on my household income is subject to verification by authorized representatives of the City of Cranston, Department of Community Development, and the U.S. Department of Housing and Urban Development. **This information will be kept confidential and used for HUD monitoring purposes only.**

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent/Legal Guardian: \_\_\_\_\_