



## **UNIVERSITY VISION LEADERSHIP CYD LI MEMORIAL SCHOLARSHIP APPLICATION**

### **PURPOSE:**

University Vision Leadership (UVL) is a non-profit organization that seeks to provide financial aid to students who demonstrate need. UVL offers annual scholarships to Vision 16 students to assist with the cost of room & board in the Vision 16 houses. New and returning students are eligible for the annual scholarships. Returning students must reapply each year.

### **APPLICATION INFORMATION:**

- Please type responses
- Send applications and applicable attachments to [uvl.scholarships@gmail.com](mailto:uvl.scholarships@gmail.com). Incomplete applications will not be considered.
- Email questions to [uvl.scholarships@gmail.com](mailto:uvl.scholarships@gmail.com).
- Any knowing misrepresentations will result in termination of consideration or revocation of scholarship.

### **TIMELINE:**

- The deadline to submit the application by **April 20, 2025 at 11:59 PM**
  - If due date has passed, please submit an application as exceptions are made on a case by case basis
- UVL will email eligible candidates as soon as possible to schedule a phone interview.
- Scholarship recipients will be notified by May 10, 2025.

### **CRITERIA FOR SCHOLARSHIP RECIPIENTS:**

- UVL Scholarship offers are contingent upon acceptance to Vision 16.
- Recipients must commit to living in Vision 16 houses for one academic school year.
- Scholarship recipients must comply with all Vision 16 living obligations outlined in the Vision 16 Housing Contract and Community Living Agreement.



## UNIVERSITY VISION LEADERSHIP SCHOLARSHIP APPLICATION

### **Personal Information:**

Name: \_\_\_\_\_  
First Last

Permanent Home Address: \_\_\_\_\_  
Street/PO Box Apartment #

\_\_\_\_\_  
City State Zip/Postal Code

Email \_\_\_\_\_ Phone \_\_\_\_\_

What grade level are you entering?

Freshman

Sophomore

Junior

Senior

Current V16 House:

17th Ave House

Noho

Trio

Soho

Current Applicant

### **Family Information:** (if two parents or guardians, fill out both sections)

Parent or Guardian #1: \_\_\_\_\_  
First Last

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Parent or Guardian #2: \_\_\_\_\_  
First Last

Occupation: \_\_\_\_\_

**Short Response Questions:**

*Please attach typed responses to the following questions. Note that response need not be more than 1 typed page.*

1. Tell us a short background about yourself.
2. Why do you want to live in the Vision 16 houses?
3. What direct impacts would receiving this scholarship have on your life?
4. Is there anything else you would like us to know about you? For example, any extracurriculars, hobbies you enjoy, info about your family, etc.

**Financial Need:**

*Please answer the following questions regarding your financial need:*

- Would not receiving this scholarship change your housing plans?
- What is your specific financial need for room and board?
- Are you currently employed, or do you plan to work while in school? If so, please describe your anticipated hours and wages.
- Are there any other personal/family circumstances that contribute to your need of financial aid?

*Fill in the table with anticipated financial contributions from the following sources. See end of document for a filled out example.*

Contribution Source	Amount			
	2025-2026 School Year		2024-2025 School Year	
	Room & Board	Tuition	Room & Board	Tuition
Parent/Guardian				
Self				
Scholarship(s)				
Financial Aid/Loan				
Other				
<b>Total</b>				

List sources of financial aid or scholarship:

Financial Aid/Scholarship Name	Amount Awarded (\$)
Financial Aid/Scholarship Name	Amount Awarded (\$)
Financial Aid/Scholarship Name	Amount Awarded (\$)



## UNIVERSITY VISION LEADERSHIP FINANCIAL INFORMATION FORM

This section is to be completed with the assistance of a parent or guardian of the applicant. If preferred, this section can be sent directly to [uvl.scholarships@gmail.com](mailto:uvl.scholarships@gmail.com).

Name of Applicant:

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Name of Parent(s)/Guardian(s):

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Parent/Guardian's relationship to Applicant:

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Circle parents' or guardians' approximate combined gross income for the previous year:

☐ Less than \$50,000

☐ \$100,000 - \$150,000

☐ \$50,000 - \$100,000

☐ \$150,000 or more

Include a copy of the first two pages of your tax returns (form 1040, 1040A, 1040EZ or 1099 SSA-Social Security form) for the previous two tax years.

**FOR SECURITY, PLEASE REMOVE/OBSCURE ANY SOCIAL SECURITY NUMBERS.**

Acknowledgement:

*I authorize University Vision Leadership to obtain and use the information provided for the purpose of assessing the applicant's candidacy for a scholarship from University Vision Leadership. To the best of my knowledge, the financial information in this application is true, complete and accurate. Knowing misrepresentations will result in termination of consideration or scholarship revocation.*

Type name or sign below to acknowledge the above statement:

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Applicant Signature

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Date



Contribution Source	Amount			
	2025-2026 School Year		2024-2025 School Year	
	Room & Board	Tuition	Room & Board	Tuition
Parent/Guardian		\$2,000		\$6,645
Self	\$11,869	\$2,000	\$11,869	
Scholarship(s)				\$2,000
Financial Aid/Loan		\$8,645		\$4,000
Other				
<b>Total</b>	\$11,869	\$12,645	\$11,869	\$12,645

2024-2025 school year should be actual numbers paid for the current school year  
2025-2026 school year should be projected numbers for next school year