



**Scholarship Application
Norwalk-La Mirada Adult School**

The City of Norwalk has scholarships available to assist low income residents with the cost of technical training in health sciences and medical technology or welding/metal fabrication. The training is offered through the Norwalk-La Mirada Adult School (NLMAS). Funding for this program is provided by the Community Development Block Grant program.

How much is the scholarship?

The City will pay for the cost of tuition (class fees). Depending upon the program, the amount of assistance can range from \$1,224 to \$2,740. The student is responsible for the cost of books, uniforms, background checks, and/or exams. Funding for the program is limited.

How do I qualify?

1. You must be a Norwalk resident. Proof of residency is required.
2. You must be 18 years of age or older.
3. You must submit a completed application and essay during the City's application period.
4. Your total combined household income cannot exceed the following income limits:

Number in Household	Income Limit
1	\$77,700
2	\$88,800
3	\$99,900
4	\$110,950
5	\$119,850
6	\$128,750
7	\$137,600
8	\$146,500

Essays will be scored by a Review Committee comprised of City and Adult School staff. An applicant will be ranked according to average score given. Applicants receiving top ranking will be offered scholarships first until all funding has been exhausted.

How is the assistance paid?

Scholarships will be awarded on a first come, first served basis. Your class cannot begin before the scholarship has been awarded. The scholarship is paid directly to the Norwalk-La Mirada Adult School (NLMAS) after you have enrolled in your classes and have qualified for the City's NLMAS Scholarship Program. The City will pay half the tuition to NLMAS upon enrollment and the remaining half upon completion of classroom work.

What are some of the requirements of the program?

You may not change the course that you wish to take as indicated on your application once your application is received by the City. You must remain enrolled and maintain good attendance throughout the program. Your scholarship may be canceled if you are not making satisfactory progress. NLMAS will provide the City with regular attendance reports during your classroom work. Participants completing an internship program will need to provide the City with job placement details.

Where is the training located?

The location of the training depends upon the course that you are enrolling in. Some classes are held in La Mirada and others in Norwalk.

What training programs are offered?

CNA: Nurse Assistant Pre-Certification: Training prepares participants for employment in long term and acute care facilities, as well as home health agencies. Participants train in basic nursing skills through classroom instruction and supervised clinical experience. Participants learn the fundamentals of patient care, nursing and communication skills, disease organisms and infection control, basic anatomy and physiology, nutrition/diet therapy, and specialty nursing. Successful completion of the Nurse Assistant course enables the student to apply to take the test for State Certification through the Regional Testing Center.

Dental Assisting: Training prepares student for a job as a dental assistant in both front and back office practices. Participants learn chair-side assisting in general dentistry procedures. Classroom instruction includes dental terminology, dental x-ray, and identification of dental instruments, sterilization procedures and preparation of dental materials. Dental billing and front office procedures are included. An x-ray license is issued upon successful completion of the course. An internship at a local dental office begins upon completion of classroom and lab hours.

Medical Assisting Administrative & Clinical: Training prepares participant for a career as a Medical Assistant. Participant learns vital signs, injections, venipuncture, assisting with surgeries, sterilization, performing EKG's, infection control, basic in-office laboratory testing, billing, terminology, records filing, and reception. This class includes externship in a physician's office or medical group office upon successful completion of classroom and lab hours.

Medical Billing & Coding: Training for career as Medical Biller and Coder in a medical facility, billing service, or to start own business billing insurance companies and individuals. Participants learn Medical terminology, procedural coding, insurance form preparation, collection policies, and computerized procedures used in medical offices. Included in the course is knowledge of CPT and ICD-9 coding rationales using official coding and reporting. Upon successful completion of this course, the participant will be prepared to take the National Coding Exam.

Pharmacy Technician: Training for career as Pharmacy Technician in both hospital and retail pharmacies. There are four modules required for successful completion. Participants are eligible for an externship in a hospital or retail site upon completion of classroom training and clinical hours. The student can apply for their Pharmacy Technician License from the State of California.

Welding/Metal Fabrication: Training prepares participants in welding careers in manufacturing, construction, utilities, and other sectors. Training includes instruction in shielded metal arc welding, arc welding, gas metal arc welding (MIG), gas tungsten arc welding (TIG), oxy-fuel cutting of carbon, steel, aluminum and stainless steel. Participants may take two classes. Class prepares students for Certified Welder Licensing Exam.

For more specific information about the NLMAS programs, class schedule, and requirements, visit <http://www.nlm.as.org>





**Scholarship Application
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Application Checklist

- Completed and signed Application Form**
- Proof of residency, applicant identification, and proof of income (see Document List)**
- Applicant Information form**
- Signed Authorization for the Release of Information**
- Signed participant Agreement**
- One-page essay**

The deadline to submit a completed application is by 5:00 p.m. on Tuesday, August 6, 2024.



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Document List

In order to evaluate your application for eligibility we will need copies of the following documents (*walk-ins are welcomed, we will make copies for you*):

PROOF OF RESIDENCY – **One** of the items listed below must be submitted with application, and show your current Norwalk address.

- ▶ **UTILITY BILL** – Current water, gas, trash, or electric bill showing your name and the service address.
- ▶ **CHILDREN'S SCHOOL RECORD** showing name and address.
- ▶ **PHOTO IDENTIFICATION** - copy of State or Federal issued identification for person applying for the scholarship.

APPLICANT IDENTIFICATION

- ▶ **PHOTO IDENTIFICATION** – If not provided as proof of residency.
- ▶ **SOCIAL SECURITY CARD** – copy of Social Security card of person applying for the scholarship.

PROOF OF INCOME - for all household occupants over the age of 18 (check all that apply and submit required documentation). Income is projected for current year based on the following:

- 2023 TAX RETURNS** with all schedules and attachments to include W-2's, 1099's etc.
- SELF –EMPLOYED** - current quarterly statement, business ledger, business license, 2023 & 2022 tax returns with all schedules and attachments and any other requested information.
- CHECK STUBS** – 2 consecutive months of current stubs for all working parties in the home.
- SOCIAL SECURITY** – Award letter and year-end statement, copy of check, or if direct deposit copy of latest bank statement.
- PENSION** – Year-end statement and copy of check, award letter, if direct deposit copy of latest bank statement.
- CalWorks** – copy of current Notice of Action and a quarterly re-assessment report that states cash aid amounts.
- GENERAL RELIEF** – copy of current Notice of Action.
- UNEMPLOYMENT/DISABILITY/WORKERS COMPENSATION** - copy of award letter and check stubs.
- CHILD/ALIMONY SUPPORT** – copy of court order or notarized letter of absent parent indicating monthly support amount.
- CASH** - a written statement from whom the person is receiving the cash to include the amount and how often and for how long.
- INTEREST EARNED** from investments and bank accounts – year-end statement and most recent bank statement indicating the year to date interest.
- 18 and older and attending school** – official copy of college transcripts, if 12 units or more, or current high school report card, if attending high school.
- 18 and older not working or attending school** must submit proof of unemployment benefits or ineligible for benefits by EDD office.
- PROOF OF ANY OTHER SOURCE OF INCOME**

Additional documentation may be requested during application review.

For questions or further assistance, please contact the Housing & Neighborhood Development Division at (562) 929-5951.



Scholarship Application Norwalk-La Mirada Adult School

Application Form

To be completed before classes have started.

APPLICANT INFORMATION	Applicant Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Social Security Number	Marital Status		
				<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced		
Disabled: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list disability:				
Race & Ethnicity: (check all that apply)						
<input type="checkbox"/> White		<input type="checkbox"/> Black / African Am.		<input type="checkbox"/> Hispanic		
<input type="checkbox"/> Asian & White		<input type="checkbox"/> Black / African Am. & White		<input type="checkbox"/> Am. Indian / Alaskan Native		
<input type="checkbox"/> Indian/Alaskan Native & White		<input type="checkbox"/> Am. Indian / Alaskan Native & Black/African Am.		<input type="checkbox"/> Native Hawaiian/ Other Pacific Islander		
				<input type="checkbox"/> Asian / Pacific Islander		
				<input type="checkbox"/> Other Multi-Racial		
Address:				Email address:		
HOME Phone Number		Cell Phone Number		Work Phone Number		
HOUSEHOLD OCCUPANTS LIST <u>ALL</u> OF THE PEOPLE WHO LIVE WITH YOU	1. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	2. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	3. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	4. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	5. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	6. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	7. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			
	8. Full Name: First, Middle & Last Name			Gender		
				<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Date of Birth	Age	Relationship to You			

FINANCIAL INFORMATION (List all household occupants OVER the age of 18)

MONTHLY INCOME

Type of Income	Yes	No	Name of Household Occupant	Monthly Amount	Name of Source (Employer etc.)
Employment/Wages				\$	
				\$	
				\$	
Social Security (SSA/SSI)				\$	
				\$	
Pension(s)				\$	
				\$	
CALWORKS (AFDC)				\$	
General Relief				\$	
Unemployment/Disability				\$	
Workers Compensation				\$	
Child Support				\$	
Alimony Support				\$	
Cash (gifts or loans)				\$	
Rental Property Income				\$	
Interest Income				\$	
Other Income				\$	
TOTAL MONTHLY INCOME				\$	

Eligibility is based on current gross annual income projected for the year.

I/We declare, under penalty of perjury, that the above information is true and accurately represents the household composition and income.

Applicant Signature

Date

Signature of Adult Household Occupant

Date

Signature of Adult Household Occupant

Date

Signature of Adult Household Occupant

Date



APPLICANT INFORMATION

Have you ever participated in a Southeast Regional Occupational Program (ROP) or Norwalk-La Mirada Adult School training program? Yes No

If so, what was the class(es)? _____

What training program will you be enrolling in? (mark one) The program cannot be changed after your application is received.

- CNA: Nurse Assistant Pre-Certification
- Dental Assisting
- Medical Assisting
- Medical Billing & Coding
- Pharmacy Technician
- Welding/Metal Fabrication

What is the highest degree that you have earned? (mark one)

- None
- GED Certificate
- High School Diploma
- Technical/Certificate
- AA/AS Degree
- Bachelor Degree
- Graduate Degree

Primary reason for attending NLMAS Career and Technical Education? (mark one)

- Improve skills
- Get a job
- Improve job/wages
- Personal/Family Goal
- Prepare for Higher Ed

AUTHORIZATION FOR THE RELEASE OF INFORMATION

Agency requesting release of information

City of Norwalk Community Development Block Grant
12700 Norwalk Blvd.
Norwalk, CA 90650

Authority: 42 U.S.C. 1437 and 3535(d), implemented at 24CFR 982.551(b)

Purpose: In signing this consent form, you are authorizing HUD and the above named Agency to request information including but not limited to: identify and marital status, employment income and assets, residences and rental activity, Medical or Child Care Allowances, Credit and Criminal Activity. HUD and the Agency need this information to verify your eligibility for assistance under the Home Improvement Program.

Uses of Information to be obtained: The City of Norwalk is required to protect the information it obtains in accordance with the Privacy Act of 1974, U.S.C. 552a. HUD or the City of Norwalk may disclose information (other than tax return information) for certain routine uses, such as to other government agencies for law enforcement purposes, to Federal: agencies for employment suitability purposes and to as for the purpose of determining assistance under the NLMAS Scholarship Program. The City of Norwalk is also required to protect the information it obtains in accordance with any applicable State privacy law. HUD and the City of Norwalk employees may be subject to penalties for unauthorized disclosures or improper uses of the information that is obtained based on the consent form.

Who must Sign the Consent Form: Each occupant of your household who is 18 years of age or older must sign the consent form.

Failure to sign the Consent Form: Your failure to sign the consent form may result in the denial of eligibility or termination of assistance for the NLMAS Scholarship Program.

Sources of Information: The groups or individuals that may be asked to release the authorized information include but not limited to:

Homeowners Insurance Companies	Medical and Child Care Providers	Credit Providers and Credit Bureaus
State unemployment agencies	Veterans Administration	Courts and post offices
Past and Present Employers	Support and Alimony Providers	Law Enforcement Agencies
Social Security Administration	Retirement Systems	Utility Companies
Schools and Colleges	Welfare Agencies	Mortgage Companies

Consent: I consent to allow HUD and/or the City of Norwalk to request and obtain any information from any Federal, State or local agency organization, business, or individual for the purpose of verifying my eligibility and level of benefits under the City of Norwalk's NLMAS Scholarship Program.

This Consent form expires 15 months from _____
Insert today's date

Print Name and Sign:

Applicant:			
Print Name	Signature	Date of Birth	Social Security Number
Other Family Occupant over the age of 18::			
Print Name	Signature	Date of Birth	Social Security Number
Other Family Occupant over the age of 18:			
Print Name	Signature	Date of Birth	Social Security Number

Penalties for Mis-using this Consent:

HUD and the City of Norwalk and or any employee of HUD or the City of Norwalk may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an application or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the City of Norwalk or the owner responsible for the unauthorized disclosure or improper use

Original is retained by requesting agency



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PARTICIPATION AGREEMENT

Applicant Name: _____

Date: _____

We are pleased that you wish to participate in the City of Norwalk Norwalk-La Mirada Adult School (NLMAS) Scholarship Program. Please confirm by signing below and returning this Agreement and all application materials to the Housing & Neighborhood Development Division that you wish to participate in the NLMAS Scholarship Program, under the conditions outlined below:

1. Applicant understands and agrees that the initial submittal of an application does not constitute approval for the NLMAS Scholarship Program.
2. Applicant understands and agrees that the City of Norwalk is under no obligation to approve any financial assistance except in accordance with the U.S. Department of Housing and Urban Development regulations and the City of Norwalk's Program Policies.
3. Applicant understands and agrees that funds requested under the City of Norwalk's NLMAS Scholarship Program are made available only in accordance with U.S. Department of Housing and Urban Development regulations, the City of Norwalk's Policies, this Agreement, and all applicable federal, state and local laws, regulations and codes.
4. Applicant understands and agrees that any material, documentation, correspondence, applications or forms submitted to the City for the Scholarship Program becomes the property of the City and will be retained by the City for a minimum of five (5) years regardless of whether assistance was provided to the applicant.
5. Applicant understands and agrees that any funds approved under the NLMAS Scholarship Program are subject to continued availability of funds provided by the U.S. Department of Housing and Urban Development to the City of Norwalk and that at any time prior to assistance closing the City may, as its sole option, cancel any contemplated assistance under the program.
6. Applicant understands that only tuition (fees) for courses offered by the Norwalk-La Mirada Adult School are eligible for funding. The cost of additional item(s) required as a part of the coursework, such as books, uniforms, background checks and exams, are not eligible for reimbursement under this program.
7. Applicant understands and agrees that financial assistance may be canceled if the applicant is not enrolled in the next available session with the Norwalk-La Mirada Adult School within ten (10) days of being awarded the City of Norwalk's NLMAS Scholarship.
8. Applicant understands and agrees that the applicant cannot change the program/course once this application is received by the City.
9. Applicant understands and agrees that assistance may be canceled if the applicant fails to enroll in NLMAS, withdraws from NLMAS, drops the class, or is not making satisfactory progress with the courses. If assistance is canceled, the applicant may be required to repay the City for tuition costs incurred by the City.
10. Applicant understands and agrees that the City in no way guarantees quality of the course material or instructors and that applicant shall hold harmless the City of Norwalk, its officers, agents or employees from any liability resulting from applicant's participation in the program.

11. Applicant understands and agrees that the City of Norwalk's participation in the Norwalk-La Mirada Adult School, and any action the City may take in conjunction therewith, is solely for the applicant's benefit and that the City assumes no responsibility or liability to applicant or to any party for any action, or failure of action, by a contractor or any third party.
12. Applicant understands and agrees that in the event there should be a dispute between the parties hereto concerning any part of this agreement or any of the City of Norwalk's Program policies, then such a dispute shall be referred to the Housing Manager, at City Hall, for arbitration. The Housing Manager shall review all facts and contentions and make known his decision to the parties. The decision shall be final, conclusive, and binding upon the parties and not subject to any appeal to any Court of Competent jurisdiction. The parties hereto expressly covenant to be bound by the provision herein contained and acknowledge their awareness of, and agreement to, the contents of these arbitration terms and conditions.
13. Applicant understands and agrees that, if at any time during their participation in the NLMAS Scholarship Program, applicant fails or refuses to meet any provision of this agreement and/or any of the City of Norwalk's Program policies, or commit any act of misrepresentation, that, in addition to other remedies available, the City may: unilaterally, and as its sole option, terminate applicant's participation.

Should you have any questions, call us at (562) 929-5951, the Community Development Staff will be pleased to answer them.

ACCEPTED BY:

Applicant:

Applicant Signature

Date

City of Norwalk:

Community Development Staff Signature

Date





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Written Essay Instructions

On a separate sheet of paper, please write an essay to address the following questions. Be sure to use examples to validate your answers. Your essay should be no longer than 1 page, double-spaced and typed.

1. Describe your career and life goals and how the Norwalk-La Mirada Adult School program will help you achieve your career goals.
2. Explain how the financial assistance will enable you to participate in career and technical training.
3. Describe why you are an excellent candidate for this scholarship and for the career and technical training program.