



Foundation, Inc.

Certified Nursing Assistant/Home Health Aid Scholarship

Overview

At Home Nursing Care, Inc. is a leading provider of home care and home health services in Southern California. In an effort to make a rewarding career in home health more accessible, our foundation has pledged to provide at least one, and up to three, C.N.A./HHA Scholarships per year. Candidates must submit a completed application along with at least one letter of recommendation and attest to their financial need. A scholarship committee will approve or deny the Application approximately 30 to 60 days from date of submittal. Any CDPH approved C.N.A./HHA program is eligible as long as it is in good standing and conforms to market rate tuition.

Who is eligible?

- Local residents of San Diego County and Los Angeles County
- Those who can demonstrate or attest to financial need
- Those who wish to work in home health and will pledge to work in home health for one year upon completion of the C.N.A./HHA training program at any company that offers such service. If that company is At Home Nursing Care, then the candidate must fulfill all hiring requirements and complete a separate application for employment. Award of a scholarship is not an employment contract or a promise of employment with At Home Nursing Care, Inc. Should an employment relationship develop, it will be at will, and severable on an at-will basis by either party, with or without notice.
- Current At Home Nursing Care, Inc. employees are given preference, but being an employee of At Home Nursing Care, Inc. is not a pre-requisite for the scholarship

Application Requirements

- A completed application for scholarship (attached)
- Proof of authorization to work in the United States
- Letter of recommendation from a high school counselor/teacher, manager in home health or previous/current employer
- Ability to meet the CA state requirements to become a C.N.A./H.H.A
- Proof of local residency (local utility bill, copy of rental agreement, etc.)

Any scholarship award will be funded by At Home Nursing Care Foundation, Inc., and paid to the vocational school upon student's acceptance, or the scholarship awardee who presents a receipt of prior payment within the previous two weeks.

Funds awarded must be used within four months of award, absent a written extension from At Home Nursing Care Foundation, Inc. (Such as if the particular school changes its training schedule or puts the award winner on a waiting list.) The scholarship may only be used for tuition and state testing fees up to the award amount, and documentation to that effect must be submitted to the foundation within 14 days of use of funds. Any additional fees above the award, including any re-testing fees, must be paid by the recipient.

The scholarship committee may request an in-person interview before deciding on a scholarship award. Scholarship winners will be notified via email or written letter within two weeks of award. Awards will be made without reference or bias to the applicant's race, creed, religion, place of origin, sex, gender, gender identity, sexual orientation, marital status, military status or other protected status. Award of a financial scholarship is not an offer of employment and does not constitute a contract between At Home Nursing Care, Inc., At Home Nursing Care Foundation, Inc. and applicant. If applicant is unable to meet any of the above-listed Application Requirements, he or she will not be eligible for the scholarship.

Submission

Please submit complete and signed application packet to:

At Home Nursing Care Foundation, Inc.
Attn: Scholarship Committee
531 Encinitas Blvd Suite 120
Encinitas, CA 92024

You may also email the packet to contact@ahncfoundation.org . If you have any questions, feel free to contact Lynda Clerke at 760 557-9477.

Application Checklist (Use this to make sure all items are completed before submitting your application packet)

- Completed Application including Signature
- 1 Letter of Reference from Counselor/Teacher, manager in Home Health/Homecare or Previous/Current Employer
- Proof of authorization to work in the US
- Proof of Residency (utility bill, letter from landlord, etc.)



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Student Demographic Information:

Name: _____
Last First Middle Initial

Current Mailing Address: _____
Street Apt. or Unit #

City State Zip Code

Telephone Number: _____ Email: _____

Are you legally authorized to work in the United States? Yes No

High School Attended: _____

Did you graduate? _____

Did you attend college or vocational school? Yes No

Did you graduate? Yes No or Not Applicable

If yes, where did you attend college or vocational school?

Name of Program(s)	Level of education or certification reached

Financial Need Statement

Do you attest that you have a financial need for this scholarship, meaning that you have no other means of paying for tuition such as other grants, scholarships, awards, educational savings, etc.?

Yes, I attest I have a financial need. _____ (Initial here)



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Please give the name(s) and contact information for the person providing your letter.

Name of Reference	Phone Number	Email Address

1. Are you willing to work as a Certified Nursing Assistant/Home Health Aide for at least one year upon completion of training? Yes No
2. Did you review the background requirements to enroll in C.N.A/HHA training in CA and do you meet those requirements? Yes No
3. Have you enrolled in a C.N.A/HHA vocational program? Yes No
4. Which C.N.A/HHA vocational program do you wish to attend?

a.
b.
c.

5. What is the full tuition of the program you plan to attend? _____

Certification Statement

I hereby certify that the information I have provided on this application form and any attached materials is true and correct.

Applicants Legal Signature

Date

Submission of Application

Review the checklist on the cover page to make sure application package is complete. Then return completed application and requested materials to:

At Home Nursing Care Foundation, Inc.
 Attn: Scholarship Committee
 531 Encinitas Blvd Suite 120
 Encinitas, CA 92024
 760-634-8000
 Or submit via email at contact@ahncfoundation.org