University of Hartford

ACE Mentoring Program Scholarship Application

2024-2025

Scholarship Description
The University of Hartford will annually award three students University of Hartford’s ACE Mentoring Program Scholarships in the amount of $5,000 along with qualified University merit scholarships. This will be awarded to high school seniors who are interested in architecture or engineering and participated in the ACE Mentoring Program.

To be considered for this scholarship opportunity students must:

- Have been an active member of ACE for a minimum of two years;
- Be admitted into any program offered by the College of Engineering, Technology, and Architecture, with a preference to students in the architecture program.

The scholarship is renewable annually for a maximum of four years according to the academic scholarship policies described in the University’s Undergraduate Bulletin.

Application
To apply for this scholarship, interested students must complete an application for admission to the University, as well as submit a Scholarship Application and Mentor/Advisor Recommendation Application. Please send all documentation to the contact person below.

Application Deadline
The application deadline for this scholarship is March 1, 2024.

Contact Information
Student Financial Aid Scholarships
Office of Student Financial Aid
University of Hartford
200 Bloomfield Avenue
West Hartford, CT 06117
sfaschols@hartford.edu
1.860.768.4296
University of Hartford’s

ACE Mentoring Program

2024-2025 Scholarship Application

***Deadline: March 1, 2024***

How to Apply:
Complete the following:
  • Complete University of Hartford’s Admission Application at http://admission.hartford.edu/apply/
  • ACE Mentoring Program Scholarship Application
  • Provide one Mentor Reference Form or one Letter of Recommendation from ACE Mentor

Send all documents via email, fax, or standard U.S. mail to the contact information below.

SFA Scholarships, Student Financial Aid Office
University of Hartford
200 Bloomfield Avenue
West Hartford, CT 06117
sfaschols@hartford.edu
1.860.768.4296

Personal Information

Name: 
First    Middle    Last
Address: 
City:       State:    Zip Code: 
Country:            US Citizen:  Yes / No
Telephone:      E-mail: 
Year(s) of participation:            Intended College Major: 

University of Hartford Admissions Application Status:
  □ Submitted
  □ Will be Submitted

Signature: 
Date: 

By signing this application, I agree that all information is accurate to the best of my knowledge.
University of Hartford’s
ACE Mentoring Program
2024-2025 Scholarship Application
(Mentor Reference Form)
***Deadline: March 1, 2024***

Student Applicant Name: ____________________________
How long have you known this student? : ____________________________
How long have you advised this student in ACE? : ____________________________
List all positions this student held in ACE (if any):
_______________________________________________________________________________
_______________________________________________________________________________

Please rate student’s characteristics below.

<table>
<thead>
<tr>
<th></th>
<th>1 (Low)</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 (High)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teamwork</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problem Solving</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persistence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical Skill</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to Multi-Task</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive Attitude</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chance of College Success</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Are there any other qualities, skills, or talents this student exhibits that would help the University choose to offer a Hartford ACEF Scholarship?
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Advisor Name (Print): ____________________________  Title: ____________________________
Signature: ____________________________  Date: ____________________________

By signing this application, I agree that all information is accurate to the best of my knowledge.