



**APPLICATION FOR A GRANT**  
**ASA Educational Foundation\***  
**American Society of Appraisers**

11107 Sunset Hills Road, Suite 310  
Reston, VA 20190  
Phone: (800) 272-8258

**POLICY:** The ASA Educational Foundation’s purpose is to further appraisal and valuation education. The ASA Educational Foundation Board of Directors can make grants available to any organization or individual and loans to any organization that meets the Board of Directors’ standards in accordance with the Educational Foundation’s Charter and By-Laws. All loans or grants are made at the sole discretion of the Educational Foundation’s Board of Directors.

**GENERAL INSTRUCTIONS:**

- Type or print and complete all of the applicable information. Incomplete applications are subject to automatic rejection.
- Attach any additional information that may be needed.
- The grant request may be denied if false or misleading information is given.
- It is the policy of the ASA Educational Foundation to only approve requests for grants BEFORE the time that the grant is needed.
- The Board of Directors will act on all applications and will render its decision within 45 to 90 days of receipt of any applications, so all grant requests must be submitted 90 days before the event for which the grant is requested.
- The approval process can take several weeks, so any requests must be received well in advance of the date the funds are actually needed. If a request for a grant is approved, it is also the policy of the ASA Educational Foundation to make any grant payments directly to the offering body and not to the individual or body making the request.
- All grant requests must be received ninety (90) days before the event for which the grant is requested.
- Grants must be used within 90 days of their approval or the grant will be withdrawn and the funds will be redirected.
- Please be advised that any grants issued by the ASA Educational Foundation are for one course at a time. Applicants may request for more than one course, but such requests will not be granted until the applicant provides proof of successfully completing the first approved course coupled with a request to be approved for a subsequent course. The ASA Educational Foundation may require completion of a completely new application and more current data before approval is granted for additional course work.

**PERSONAL INFORMATION**

Name \_\_\_\_\_

Permanent Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Country \_\_\_\_\_

Day Telephone Number \_\_\_\_\_ Evening Telephone Number \_\_\_\_\_

Mobile Telephone Number \_\_\_\_\_ Facsimile Number \_\_\_\_\_

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

Home Address (if living with parent) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Country \_\_\_\_\_

\*The ASA Educational Foundation is a separate and distinct corporation from the American Society of Appraisers.

Home/Parent Phone Number \_\_\_\_\_

Citizen of what country? \_\_\_\_\_

Are you a foreign student studying or planning to study in the U.S.? \_\_\_\_\_

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION:**

State highest education level and all schools of higher learning, dates attended, degrees received and dates degrees were received.

Institution Name and Location \_\_\_\_\_

Dates Attended \_\_\_\_\_ Degrees Received \_\_\_\_\_ Dates Degrees Received \_\_\_\_\_

Institution Name and Location \_\_\_\_\_

Dates Attended \_\_\_\_\_ Degrees Received \_\_\_\_\_ Dates Degrees Received \_\_\_\_\_

Institution Name and Location \_\_\_\_\_

Dates Attended \_\_\_\_\_ Degrees Received \_\_\_\_\_ Dates Degrees Received \_\_\_\_\_

**FINANCIAL AND EMPLOYMENT BACKGROUND**

Current Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Company Telephone Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

Current Salary \_\_\_\_\_

Please be sure to provide:

- Copies of your last three years' income tax returns.
  - (Note: Company returns will not be accepted. If joint return, indicate appropriate portion attributed to applicant.)
- A financial statement of the applicant's net worth.

**PRIOR EMPLOYMENT**

Company Name \_\_\_\_\_ Dates \_\_\_\_\_ Salary History \_\_\_\_\_

Company Name \_\_\_\_\_ Dates \_\_\_\_\_ Salary History \_\_\_\_\_

Company Name \_\_\_\_\_ Dates \_\_\_\_\_ Salary History \_\_\_\_\_

**ASA AFFILIATION: If you are a member of ASA please indicate:**

Local Chapter \_\_\_\_\_ Discipline \_\_\_\_\_

How long have you been a member? \_\_\_\_\_ Current membership status \_\_\_\_\_

How long have you had that status? \_\_\_\_\_

Do you intend to become a member? \_\_\_\_\_ If you are not a member of ASA, why not? \_\_\_\_\_

What else might the ASA Educational Foundation do to assist you in becoming a member of the ASA? \_\_\_\_\_

Do you belong to any other appraisal organizations? \_\_\_\_\_

If so, please name the organization and list any designations that you may hold. \_\_\_\_\_

Have you made any other or prior requests for grants from ASA or any other organization? \_\_\_\_\_

Were they approved or rejected? If so, please enumerate and explain. \_\_\_\_\_

Why are you seeking this grant? (check one)      College       American Society of Appraisers Level Courses   
Manuscript or Course Development       Other (please explain in detail)

Amount of grant requested \$ \_\_\_\_\_

Itemized schedule of expenses relevant to grant request \_\_\_\_\_

Purpose/use of grant (Check one.)      Tuition       Publication       Other (Please explain in detail.)

For what course are you applying?

Course Name \_\_\_\_\_

Name of Offering Institution \_\_\_\_\_

Mailing Address of Offering Institution \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Contact Person at Offering Institution \_\_\_\_\_

What is your objective in taking this course? [It is advisable to explain your objective(s) in detail.] \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you expect to take additional courses in this field? \_\_\_\_\_

If so, please explain why, what courses and when you anticipate taking them. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please explain in detail how this grant will be used to benefit the public. (Include an explanation of what educational purposes are served by this project.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

All persons providing information on this application must sign this application. If the applicant is a minor, a parent is required to sign this application in the space provided.

**AFFIRMATION**

Under the penalties of perjury, all of the information provided by me, or any person on this application, is true and complete to the best of my knowledge. I understand that this application is being filed jointly by all. If asked by an authorized official of the ASA Educational Foundation, I agree to give proof of the information contained in this application. I also understand that if I do not supply proof of information when requested, the grant processing will cease.

I further affirm to supply the ASA Educational Foundation with a copy of proof of my attendance at the designated course along with proof of my passing or failing the course.

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

Parent or other person \_\_\_\_\_ Date \_\_\_\_\_

**PROCESSING**

Please make sure you have completed, dated and signed this application. The original **should not** be mailed to ASA International Headquarters and the applicant **should not** contact ASA International Headquarters concerning the status of the request. Please mail all completed applications to:

**Richard W. Gilmore, FASA**  
**Chairman, ASA Educational Foundation Board of Directors**  
**Asset and Risk Management International**  
**38 Cemetary Rd.**  
**Charlton, MA 05107**  
**rgilmore@meganet.net**

You will be advised by mail or electronic mail if further information is required or if your request is granted or denied.

**ASA Educational Foundation Use Only**

Date received \_\_\_\_\_ Date Forwarded to Reviewers \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

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

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Processor \_\_\_\_\_ Date Signed \_\_\_\_\_