The Coding Boot Camp Scholarship 2017

The Coding Boot Camp Scholarship was established to support adults with demonstrated financial need who are interested in a career in web development, the opportunity to access training to prepare them for a career as end-to-end web developer at UCLA Extension. The Full Stack Flex course gives participants the skills they need to build dynamic web applications and become a full stack web developer. Participants can choose to enroll in a part-time program offering convenient weekend and evening classes or full-time program offering Monday through Friday classes. From day one, participants will go through a rigorous, fast paced training program and gain proficiency in the theory and application of web development. By the time participants graduate, they will have the skills needed to build and implement dynamic end-to-end web applications, plus an impressive Professional Portfolio and the confidence to success as a web development professional.

In order to be successful in the program students must:

- Attend at least 95% of class sessions, and submit at least 90% of coding and career assignments
- Provide their own transportation to get them to class on time
- Have access to Internet outside of the class to work on projects, homework, etc.
- Commit to spending at least 20-30 hours per week outside of the classroom on coding
- Can be a beginner, but must understand that this program requires a high level of commitment and must be motivated to succeed. It is not easy being a coder/web developer and the material is tough to learn.
- Be a hard worker, who is successful in the face of adversity.

To be considered eligible, applicants should meet the following criteria:

- Applicant must be a U.S. Citizen
- Minimum attainment of a high school diploma with a minimum cumulative G.P.A. of 3.0. The student's grades and GPA must appear on the student's transcripts. Must be in good standing at the time of the application and students must follow all the regulations as well as policies of UCLA Extension.
- If selected as a finalist for the scholarship, candidates will be referred to an admissions advisor, go through the admissions process, and be approved for admission into the program.
- Gross income cannot exceed \$2,500 a month for a household of one. This threshold increases 10% for each additional person in the household: household size: 1 = \$2,500 a month; 2 = \$2,750, etc.
- UCLA and UCLA Extension employees and their family members or dependents are not eligible to apply.

To apply, candidates must submit by Friday, July 28th:

- Completed application form
- 450-500 word, typed Personal Statement & responses to Short Answer Questions (max 3-5 sentence response per question)
- · Official transcript from high school, college or university to demonstrate highest educational attainment
- Two recommendation letters; recommenders may be current or former employers, college teachers, or leaders of volunteer or civic
 organizations with whom you have worked
- A signed photocopy of your/your spouse's 2015 Federal Income Tax Return (IRS Form 1040, 1040A, 1040EZ 1040TEL) with all
 schedules and worksheets (or that of your parents if you were claimed as a dependent; parental tax returns are required for applicants
 born after 01/01/1993)
- · A photocopy of your/your spouse's most current payroll check stub(s): check stubs must be dated within the past 30 days
- If you are currently unemployed and/or receiving public assistance, current documentation dated within the past 30 days verifying source of income and monthly entitlement is required
- Eligibility criteria for all final candidates will be checked and confirmed by UCLA Extension

Application Deadline Friday, July 28th at 4:30 pm

Applications will only be accepted via US mail or hand delivered to: Elise C. Lebron, UCLA Extension, 10995 Le Conte Avenue, Room 770, Los Angeles, CA 90024. No faxes or emails are accepted. Postmarks will be honored.

Only complete applications will be considered. Submission of applications that are incomplete, late or from students who are not eligible will not be considered. Applications will not be returned. UCLA Extension reserves the right to request additional financial documentation.

If you have any questions regarding the Coding Boot Camp Scholarship, please call Elise C. Lebron at (310) 825-7728 or email scholarship@uclaextension.edu

The Coding Boot Camp Scholarship 2017

Application Form

Student's Last Name:	Last Name: First Name:			
Local Address (Number and Street):				
City:	State:	Zip:		
Daytime Telephone: ()	Email:			
Program Options: Full Time or Part Time (cho	ose 1)			
() Full Time Program: (3 month program) Starts Monday, October 16th- Class meets	in Woodland Hills on Monday th	hrough Friday 10:00 am - 3:00 pm		
() Part Time Program: (6 month program) Starts Monday, November 6th - Class meets	in Westwood Mondays/Wedneso	days 6:30 pm - 9:30 pm and Saturdays 10:00 am - 2:00 p		
In your essay, include why you are interested in	enrolling in the Coding Boot Car g more self-sufficient. Evaluation low your past experience integrate			
PART II Short Answer Questions: Please provide typed as 1) Why are you interested in pursuing a career in		s. (3-5 sentences per question)		
2) Do you have any background in web develops	ment?			
3) Please share an example of a time you have be obstacles.	een faced with obstacles in achievi	ing a goal and you persevered regardless of those		
4) Please share an example of your experience we	orking in a group or a team settin	ng.		
	D 1			
By submitting this application to UCLA Extensi 90024, to be considered for a Coding Boot Camp true, complete, and accurate, and that I am the a Additionally, I give UCLA Extension permission scholarship review committee, and utilize quote	p Scholarship, I certify that all info author of the original personal star n to confirm my eligibility for the	formation on this form and any attachment is atement included with this application. e scholarship, share my application with the		
Student's Signature:	Date:			
If you have any questions regarding the Coding scholarship@uclaextension.edu.	Boot Camp Scholarship, please ca	tall Elise C. Lebron at (310) 825-7728 or email		

Due date: Friday, July 28th



Recommendation for the Coding Boot Camp Scholarship 2017

To be completed in full, in English, by the recommender or	nly.				
A note to the recommender: Thank you for assisting with the student's application for a scholarship. You may either use this					
form for your recommendation or provide a letter on your	own letterhead with the	requested information.			
Student Name:					
Describe your relationship to the applicant. Include len	gth of time you have kno	wn the applicant.			
Write a brief statement about how you think this student qual Coding Boot Camp. Please include an example of how this stu achieve a difficult goal.					
Recommended by:					
Name (please print)		Title			
Signature:	Date:	Phone:			

Please return this form to the applicant in an envelope with your signature across the seal. The applicant is to return the unopened envelope with the application to UCLA Extension.

Coding Boot Camp Scholarships Application 2017

Applications are only accepted during the application filing period. Only complete applications, with complete financial information, will be considered. Applications and supporting documents cannot be accepted by fax and/or email transmission.

IDENTIFICATION PLEASE TYPE OR PRINT IN INK. Name	Date of Birth Daytime Phone ()	
Last First	Middle Daytime Frione	
AddressNumber & Street	City & State Zip Code	
EDUCATION HISTORY		
Circle last year completed. High School 10 11 12 C	llege 1 2 3 4	
College Name	Dates Degree	
I have attended UCLA Extension: Yes No	Pates	
EMPLOYMENT INFORMATION		
EMPLOYER (current or most current)		
Business Phone ()Business Addre	ss	
Occupation	Gross Monthly Salary \$	
Dates Employed: From To		
Spouse's Employer		
Business Phone ()Business Addre	ss	
Occupation	Gross Monthly Salary \$	
Dates Employed: From To		
IF APPLICABLE: (Social Security Number is Claim Number)	
Unemployment: Claim Number	Disability: Claim Number	
Welfare: Social Worker's Name	Social Security: Claim Number	
Phone ()	VOC. REHAB: Counselor's Name	
	Phone ()	

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STUDENT STATUS (please check)		
I am supported by: $\ \square$ 1. Self $\ \square$ 2. Parent(s) $\ \square$ 3. Spouse $\ \square$ 4. Other Be	ginning Date	
If you checked 1, attach a signed copy of your 1040 tax form or a statement expl W-2 forms.	aining why one was	not filed, including
If you checked 2, 3, or 4, attach a signed copy of that person's 1040 tax form or a including W-2 forms.	a statement why one	e was not filed,
CONFIDENTIAL FINANCIAL STATEMENT		
	MONTHLY	ANNUAL
INCOME		
WAGES, SALARIES, ETC.	\$	\$
SPOUSE'S WAGES, SALARIES, ETC.	\$	\$
CONTRIBUTION FROM OTHERS: (If contribution is not in dollars, compute dollar amount and explain.)*	\$	\$
OTHER: TYPE	\$	\$
SOCIAL SECURITY BENEFITS	\$	\$
VETERANS BENEFITS	\$	\$
OTHER: (Child support, welfare, etc.)	\$	\$
TOTAL	\$	\$*
EXPENSES		
RENT OR MORTGAGE PAYMENT	\$	\$
FOOD	\$	\$
UTILITIES	\$	\$
INSURANCE	\$	\$
HOME/APARTMENT	\$	\$
AUTO	\$	\$
OTHER (e.g. life, theft)	\$	\$
CREDIT CARD PAYMENTS	\$	\$
TRANSPORTATION (car payments, gas, repairs)	\$	\$
MEDICAL/DENTAL	\$	\$
RECREATION	\$	\$
CHILD CARE	\$	\$
CLOTHING	\$	\$
OTHER (include payments on student loans and debts)	\$	\$
SPECIFY:		

TOTAL \$_____ \$___

^{*} Explain any exceptional financial condition on the following page. **Indicating "0" or "no income" is not acceptable.

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ASSETS AND INDEBTEDNESS (please enter figure or word "NONE")
CASH, SAVINGS, AND CHECKING ACCOUNTS AS OF THE FIRST OF THIS MONTH \$
REAL ESTATE: MARKET VALUE
UNPAID MORTGAGE
INVESTMENTS (STOCKS, BONDS, AND OTHERS)
OTHER OUTSTANDING DEBTS (not previously included)

IF YOU WISH TO EXPLAIN AN EXCEPTIONAL FINANCIAL CONDITION, PLEASE USE THE REMAINDER OF THIS PAGE OR ATTACH AN ADDITIONAL SHEET.