Tim O'Connell Memorial Scholarship

CERTIFICATE OF RESIDENCE

Applicants: please give this form to your Resident Manager

To be eligible for the Tim O'Connell Memorial Scholarship, the applicant ***must be a current or former resident*** *at a Century-owned community. Applicants: to certify your status, please have your Case Manager, Property Manager, or Resident Services Coordinator complete this form.*

_____

Applicant's Name

I hereby certify that the above-named applicant is or was a resident of:

_____

Site Name

_____

Site Address City State Zip Code

This complex is managed by: _____

(Name of Management Company)

The applicant has lived at this site for: _____

(Number of years/months)

Signature of Case Manager or Resident Services Coordinator:

_____

Signature Print Name

_____(_____)_____

Date Email Telephone

Please direct all inquiries regarding the Tim O'Connell Memorial Scholarship Program to Century at rockyscholars@century.org