

(print or type)

Schools Attended:

High School _____ Expected Date of Graduation _____ Current Grade Point Average _____

Father's Name _____ Occupation _____

Address _____

Mother's Name _____ Occupation _____

Address _____

Names, ages and schools attending of other children in the household: 1. _____

2. _____ 3. _____ 4. _____

Are you totally dependent on your parents? _____ If not, what percent support do you receive? _____

Number of others dependent upon parents? Totally _____ Partially _____

State approximate amount of aid you will receive during college year \$ _____

Sources 1. _____ 2. _____ 3. _____

Do you plan to work during vacation and/or school year? _____

Is financial aid necessary to continue your education? _____

Will you receive other scholarships? _____ How much? _____

What college or university do you plan to attend? _____

Major field of study? _____ Have you submitted an application to the school? _____

Have you been accepted? _____ Why are you interested in the health care field? _____

Please give other information about yourself that will be helpful to the Scholarship Committee

References: (Do not use relatives)

Name _____ Address _____

Name _____ Address _____

Name _____ Address _____

(Attach any reference letters)

This part of the application is to be filled out by the Applicant.

(print or type)

List your student activities other than studies, including offices held and honors received.

Describe your participation in organized activities outside of school (church, community, youth groups, etc.)

Describe more particularly those activities, including sport or recreation, in which you are “most” interested.

Do you have any special talent or ability aside from studies? What is it and what have you done to develop it?

This portion of application is to be filled by parent or guardian.
(Any information provided below will be kept strictly confidential)
(print or type)

Do you confirm applicant's statements and intentions as presented in this application?

Approximately how much financial assistance is needed, if any? Is the family able and willing to assist the applicant in completing their first year of college year?

The remaining college years?

Please make any other statement you wish as to why this scholarship would be helpful.
