

HEALTH AND WELLNESS SCHOLARSHIP APPLICATION

(Students entering the Healthcare field)

Please type or print this form completely and return to school.

Include the following:

1. General and family information.
2. Colleges/Schools to which you have applied.
3. School, Community activities and Achievements.
4. Transcripts.
5. Letters of recommendations. (no more than 2)
6. Essay (no more than one page) stating the area of Healthcare or Wellness you are considering and why you decided to pursue this field.

Section 1: General and family information.

Full Name _____ D.O.B. _____

Address _____ Tel.# _____

Personal email: _____

Work experience (if any) _____

Parent/father/guardian _____

Address _____ Occupation _____

Parent/mother/guardian _____

Address _____ Occupation _____

Total number of persons dependent on parents (include Yourself) _____

Section 2: Colleges/Schools to which you have applied.

Applied to: _____

Accepted to: _____

Top 3 choices: 1. _____ 2. _____ 3. _____

Anticipated financial needs (optional) _____

Section 3: School, Community Activities and Achievements.

Include sports, clubs, extracurricular activities and achievements.

<u>Activity</u>	<u>Years</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Don't forget to attach the following:

Section 4: A copy of your most recent transcript

Section 5: Letters of recommendation (no more than 2)

Section 6: An Essay (no more than one page) stating the area of Healthcare or Wellness that you are considering and why you decided to pursue this field.