

## APPLICANT DATA

Mr.   
Ms.  Name (Last) (First) (MI) Social Security Number (optional)

Permanent Address (Street) (City) (State) (Zip)

Date of Birth (Month, Day, Year) Telephone Number E-mail Address

High School Attended:  Redwood Valley  Wabasso  Cedar Mountain  Red Rock Central

## SCHOOL DATA

Name of postsecondary school for which applicant's scholarship is requested:

\_\_\_\_\_  4-year College/University  Vo-Tech

\_\_\_\_\_  Community College  Other

Address

\_\_\_\_\_ Accredited?  Yes  No  
(City) (State) (Zip)

Enrolled:  Less than full time  Full-time

Major field of study applicant plans to pursue \_\_\_\_\_

## DEMOGRAPHIC DATA (Optional)

Please check all that apply:

African American/Black  Asian/Pacific Islander  Hispanic/Latino  American Indian/Alaska Native  White/Caucasian

Other (please specify) \_\_\_\_\_

## TRANSCRIPT INFORMATION

Please return to the high school guidance office. They will complete this section.

Applicant ranks \_\_\_\_\_ in a class of \_\_\_\_\_. Cumulative grade point average \_\_\_\_\_/4.0 scale.

## PERSONAL DATA

### Part 1:

Describe your work experience during the past 4 years. Indicate dates of employment in each job and approximate number of hours worked each week.

<u>Position</u>	<u>Date From (mo/yr)</u>	<u>Date To (mo/yr)</u>	<u>Hours Per Week</u>
_____			
_____			
_____			
_____			
_____			

### Part 2:

Attach a list all school activities in which you have participated during the past 4 years (e.g., student government, music, sports, etc.). List all community activities in which you have participated without pay during the past 4 years (e.g., Red Cross, church work, volunteer work). Indicate all special awards and honors. Include number of years participated.

### Part 3:

Essay guidelines: (Essay should be typed, on 8.5 x 11 paper, double spaced. Include essay with this application).

Topic - Explain why you are pursuing a health care career. Describe your educational and career objectives, and future goals. Also include how any unusual family or personal circumstances have affected your objectives and goals.

**APPLICANT APPRAISAL (REQUIRED)**

To be completed by a high school instructor or a supervisor.

You have been asked to provide information in support of this application for financial aid. Please give immediate and serious attention to the following statements. Circle the answer that best fits your appraisal of the applicant. When complete, please return to applicant or photocopy this section and return to applicant in a sealed envelope.

The applicant's choice of a postsecondary education program is:	Extremely appropriate	Very appropriate	Moderately appropriate	Inappropriate
The applicant's achievements reflect his/her ability:	Extremely well	Very well	Moderately well	Not well
The applicant's ability to set realistic and attainable goals is:	Excellent	Good	Fair	Poor
The quality of the applicant's commitment to school and community is:	Excellent	Good	Fair	Poor
The applicant is able to seek, find and use learning resources:	Extremely well	Very well	Moderately well	Not well
The applicant demonstrates curiosity and initiative:	Extremely well	Very well	Moderately well	Not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks:	Extremely well	Very well	Moderately well	Not well
The applicant's respect for self and others is:	Excellent	Good	Fair	Poor

Comments (please do not name student):

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Appraiser's Signature

Date

Telephone Number

Return application to your high school guidance office.

**Scholarship applications are due March 1, 2018. All required documentation must be in our office no later than 3:30 pm.**

**You will receive an email confirmation when your email is delivered successfully.  
Interviews will take place during the week of March 26 – April 2, 2018.**