

## 2013-2014 College of Allied Health Scholarship Application

**\* Students who have already received previous scholarships from the College of Allied Health are still required to re-apply for next year's scholarship opportunities.**

**Qualified recipients should apply directly with the College of Allied Health (James 106).**

### **Scholarship Application: Policy & Procedures**

Applications Distributed: November 20, 2013

**Deadline: December 6, 2013**

Applications will not be accepted after this date.

Applications will be made available on the College of Allied Health website, Facebook, and by email to students.

Applications must be returned to the College of Allied Health (James 106), M-F 8:00-5:00 pm.

A committee will review the applications and announcement of the award will be made by the Office of Financial Aid, as part of an updated awards letter on InsideCBU.

Additional awards will be announced as necessary.

**ATTACH:**     **A copy of your Financial Aid Award Letter to your application.**  
                  **A copy of your course schedule for Spring 2014.**  
                  **A copy of your high school and/or community college transcripts. If you are a current student, enrolled at CBU, we have your transcripts on file. There is no need to attach them.**

**AWARD:**     **Recipients may receive up to \$1,000 per year divided evenly between the Fall and Spring semesters. Students must reapply annually for College of Allied Health scholarships. Satisfactory academic progress must be maintained to qualify for scholarship renewal.**

**NOTE:**       **Students must declare one of the College of Allied Health programs as a major before their application will be accepted.**  
                  **Students must also be enrolled in a minimum of 15 units per semester. Their enrollment must consist of a minimum of 2 courses per academic year that are listed in the University catalog as required courses for a major in the College of Allied Health.**  
                  **Students must be a U.S. citizen, permanent resident or eligible non-citizen.**

## College of Allied Health Scholarship Application

Student ID \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Permanent Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

High School Graduated/Attended \_\_\_\_\_ H.S. Graduation Date \_\_\_\_\_

City, State \_\_\_\_\_ SAT/ACT Scores \_\_\_\_\_

High School GPA \_\_\_\_\_

Community College/Other Colleges Attended \_\_\_\_\_ GPA \_\_\_\_\_

City, State \_\_\_\_\_ Associates Degree/Certification \_\_\_\_\_

Declared Major at CBU \_\_\_\_\_

If applicable, CBU Cumulative GPA after SP13 \_\_\_\_\_

Units Enrolled for Spring 2014 Semester \_\_\_\_\_ (Students must be enrolled for 15 units or more to be eligible)

Gender \_\_\_\_\_ Marital Status \_\_\_\_\_ Number of Dependents Under 18 \_\_\_\_\_

**Please attach a typed response to the following questions:**

### Personal Statement

1. Please give a brief narrative giving a picture of how you live your purpose. Statement may include your personal history, influences on your personal and intellectual development, educational and cultural opportunities to which you have been exposed, special interests and abilities.
2. How will your time at CBU, your involvement, and your investment into your education help you to be academically prepared, biblically rooted, globally minded, and equipped to serve?
3. Describe why you believe you are qualified to receive this scholarship. What additional need do you face that makes this scholarship important to you?

### Education

1. Describe your education and your career goals.

### Community Involvement

1. Describe your extracurricular involvement at CBU or high school (if incoming freshman).
2. Please provide examples of where you have participated and made a contribution to your local community, school, or church.