

SCHOLARSHIP APPLICATION

Deadline: March 31

This scholarship is a one-year \$1,000 award, payable directly to the college or university selected by the recipient student

Students eligible for this scholarship shall be high school seniors or career tech students attending school in NW Oklahoma who are interested in pursuing a career as a physician.

Applications must be postmarked by the deadline and mailed to: Northwest Oklahoma Osteopathic Foundation 114 S. Independence Enid, OK 73701

First Name			Last Nam	ne	Birthd	ate
Address			City	State	Zip	
Cell Phone Number Home Phone Number		Parent's Names				
GPA	ACT Score	Stude	ent's Email Address (Majority of comm	unication will be done v	ia email)	
School guidance counselor name and email address:						
I will be a full-time college student in the fall		Yes	No			
I plan to attend the following school:						
My major field of study will be:						

Accomplishments

On a separate piece of paper, please list any athletic, academic or leadership accomplishments during your high school career.

Tell us about yourself - in 200 words or less

On a separate sheet of paper, in 200 words or less, please tell us about yourself, your interests, and why you want to be a physician. Please let us know if you have any medical experience, done any physician shadowing or attending any premed exploratory programs.

Transcript

Attach a current copy of your official high school transcript including a current class ranking.

Applicant Signature (Required)

Date