



## **Application for Academic Scholarship**

## **Eligibility**

Applicants to The Minority Women in Sports Medicine Scholarship Fund must:

- Currently be a high school senior maintaining a 3.0 GPA **AND** be planning to enroll in a full-time undergraduate program for the entire upcoming academic year

### **OR**

- Currently be enrolled in an undergraduate *or* graduate program maintaining a 3.0 GPA
- Course of study must include:
  - Athletic Training
  - Physical Therapy
  - Exercise Science
  - Pre-Medical
  - Kinesiology
  - Exercise Physiology
  - ***Other course of study that provides a direct service to athletics***
- Must have completed at least **100 hours** of community service ( High School Students)

## **Awards**

- Awards are granted for undergraduate and graduate study only
- If selected as a recipient, the student will receive an award between \$500-\$1,000. The reward may be renewed for up to three additional years, or until a bachelors or masters degree is earned, whichever occurs first.

## **Selection of Recipients**

Scholarship recipients will be selected on the basis of (1) academic record, (2) demonstrated leadership, (3) participation in community activities, (4) completed essay and (5) financial need.

*Applicants will be notified by: August 2nd*

## **Application**

Interested students must complete the attached application and email to [mail@mwinsportsmed.org](mailto:mail@mwinsportsmed.org), along with transcripts and completed essay by **July 20th, 2022**.

## **Payment of Scholarship**

Payments are made in one installment on **August 8th**.

**Checks will be mailed directly to the recipients school of choice.**

**1. Personal Information**

Full name of applicant:

Home telephone number:

Present home address:

City, State, Zip:

Date of birth:

Email Address:

**2. Family Information**

Mother's name:

Occupation:

Street address:

City, State, Zip:

Phone number:

Father's name:

Occupation:

Street address:

City, State, Zip:

Phone number:

**Name and ages of siblings/other dependents. Indicate what school(s) they attend.**

Name	Relationship	Age	School or College/Years Attended

**3. Education**

a. **How many years do you plan to attend college, and what course of study would you like to pursue?**

b. **What future business or educational career will you likely pursue after finishing college?**

**c. What college(s) would you most like to attend? Please explain your reason.**

**d. What colleges have you applied to for admission? Please indicate acceptance status.**

**e. List scholarships, grants or loans for which you have applied, and check the ones you plan to use. Indicate the funding amount you will receive.**

Name	Amount	Plan to Use (Y/ N)

**4. Academic, athletic, service, and extra activities. Use additional pages or attach resume for sections 4a, 4b, and 4c.**

**a. List academic awards, achievements and dates.**

**b. List participation in athletic activities.**

**c. List participation in community service and extra-curricular activities.**

## 5. Financial Need Summary

Complete this section regarding Estimated Combined Net Income of you, your parent(s) or guardian(s) for the current year.

Name of Person	Income and Year	Total Annual Income

- b. Have you filed a FAFSA (Free Application for Federal Student Aid)? If so, please submit a returned copy showing your EFC (expected family contribution).
- c. Describe any special circumstances (medical conditions, disabilities, etc.) that may affect your ability to pay for your college tuition. Use additional pages if necessary.

## 6. Essay

Please attach a 300-500 word essay on one of the following topics:

1. Have you ever been denied an opportunity due to racial and/or gender discrimination? What lesson(s) did you learn from the experience?
2. Discuss a special attribute that sets you apart. How will it help you in the sports medicine field?
3. What has been your greatest achievement thus far and how can it be applied to your future field of study?
4. How will winning this scholarship help you attain your goals? ( *Reapplication only* )

## 7. Transcript History

This section is to be completed by your principal or guidance counselor. Attach a current transcript to this sheet. **If applying as a graduate student, you do not need to provide test scores. However, we still require a copy of your transcript.**

GPA: \_\_\_\_\_ on a \_\_\_\_\_ scale

Best Combined SAT Score: Verbal                      Math                      Writing

Best ACT Score:    Date                      Score

Signature of principal or guidance counselor \_\_\_\_\_

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I do state the above information is accurate to the best of my knowledge.

Signature of Applicant

Date