MHA Member Dependent Scholarship Application Form

“For the Education and Career Development of Healthcare Professionals”

The Scholarship covers 50% of remaining tuition balance after all federal, state, and other aid has been applied. Deadline is May 17, 2005.

Name:_______________________________________________________________

Address:_____________________________________________________________

Telephone: Home:__________________ Work:____________________________

Current area of Healthcare specialty/interest :_____________________________

· You must be a new student to Davenport University
· You must have completed an application for admission and FAFSA
· Student must be a full or part time employee of an MHA member hospital
· Student must maintain at least half-time status (6 or more credit hours) to be eligible for this scholarship
· Student must maintain a 3.0 cumulative grade point average
· Scholarship is applied toward tuition only
· Scholarship is active for one year with students eligible to re-apply

Additional Required Application Information

1. A one-page essay including the following information: Why a career in healthcare is important to you; What is your Education Goal; Why you would like to receive this scholarship and how you feel you would benefit from it.

2. A letter of recommendation from a Licensed/Certified Healthcare Professional

3. Copy of high school or college transcript

Please return completed form, required documents and materials to:

Scholarship Selection Committee
C/O Cindy Whittum
220 E. Kalamazoo Street
Lansing, MI 49833
(517) 367-8221
cindy.whittum@davenport.edu