Department of Health Promotion and Education
SCHOLARSHIP APPLICATION
Deadline: March 1, 2016 by 3:00pm

*Please complete the FAFSA by March 1st. Go to https://studentaid.ed.gov/sa/fafsa/filling-out to begin the process. All students are required to complete this application in order to be eligible for need-based scholarship awards.

Name: _____________________________________ Student ID #: __________________________

Address: ___________________________________________________________________________

Phone: _______________________________ Email: _______________________________________

Program Emphasis (circle one): Community Consumer EMS NMT Graduate Program

Anticipated Graduation Date (semester/year): ______________________ Cumulative GPA: ________

Previously awarded scholarship in this dept? Yes ___ No ___ If yes, when and what award did you receive?

List any additional scholarships and/or financial aid you have received while attending the University of Utah:

What scholarship (s) are you most interested in? (You may select up to two from the scholarships webpage)

1. ______________________________________  2. ______________________________________
What motivates you toward this major, and what are your career goals in Health Promotion and Education?

Briefly describe how a small scholarship would assist you in finishing your degree.

List any campus and/or department activities you have helped plan, organize, implement, or evaluate.

Describe any community experiences (volunteer or paid) you have had in the health education field.
*Please print and attach a current DARS report (undergraduate students) or unofficial transcripts (graduate students) to this application.

I certify the information provided on this form is true to the best of my knowledge. I understand that any transcript of credits that I provide may be reviewed by the department’s scholarship committee members. I also understand that in order to receive a scholarship I must be enrolled as a full-time student (12 credit hours for undergraduates and 9 credits hours for graduate students) during fall semester and spring semester of the academic year in which the award is received.

Applicant Signature: __________________________________________ Date: __________________

If you have questions about the application, please contact the HPE department office at 801-581-8114 or email healthpromotion@utah.edu.

Deadline: **Monday, March 1, 2016 by 3:00pm**
Submit completed application and supporting documents to the HPE department office, Annex 2142 (2nd floor, wing B)

The University of Utah is fully committed to policies of nondiscrimination and equal opportunity, and vigorously pursues affirmative action in all programs, activities, and employment with regard to race, color, national origin, sex, age, and status as a person with a disability. Religion, sexual orientation, and status as a disabled veteran or veteran of the Vietnam era also are protected under nondiscrimination and equal opportunity employment policies. Evidence of practices not consistent with these policies should be reported to the University of Utah Office of Equal Opportunity and Employee Relations, (801) 581-8365. The University of Utah Center for Disability Services, (801) 581-5020 (voice or TDD), provides resources and support services for students with disabilities.
Scholarships, Fellowships, or Other Financial Aid

Any student who receives a scholarship, fellowship, or other financial aid administered by the University of Utah is required by state law to certify that they are eligible to receive the scholarship as a U.S. citizen or a citizen of another country who is lawfully present in the U.S. If students do not know whether they are in the U.S. lawfully, they should seek the advice of an immigration attorney before filing a scholarship/financial aid application.

Student Citizenship Status (Check one of the following):

- □ U.S. Citizen
- □ Lawfully Present, Non-Citizen of the U.S.

Prior to the disbursement of any scholarship/financial aid, the University of Utah is required by law to verify with the Department of Homeland Security (DHS) the lawful presence in the U.S. of students who are not U.S. citizens. Once the University submits a student’s information to DHS for verification, this federal agency may have the legal right to share the information with other governmental agencies.

Print Name: __________________________________________________________

By signing this application, I certify under penalty of perjury that I am either a U.S. citizen or a citizen of another country who is lawfully present in the U.S. I understand that my status and eligibility for financial aid/scholarship within the U.S. will be verified through the Department of Homeland Security prior to an award of this scholarship/financial aid.

Applicant Signature: ____________________________________________________