

**APPLICATION
FOR
HEALTHCARE EDUCATION SCHOLARSHIP**

OFFERED BY
DR. PREM REDDY FAMILY FOUNDATION

Minimum Eligibility Requirement – 2.5 GPA

APPLICATION DEADLINE: JULY 1

Please type or print legibly

| | | | |
|---------------|------------|--------|----------|
| Last Name | First Name | MI | |
| Date of Birth | | SS# | |
| Street | City | State | Zip Code |
| Home Phone | Cell Phone | E-Mail | |

- Note: Please attach the following documents to this Application in order to be considered:**
- (1) **Personal Statement of Education Plans and Career Goals (max. 2,000 words)**
 - (2) **Two (2) reference letters from someone in the field of your major (not friend or relative)**
 - (3) **Copy of most recent IRS return. If living with parents, please submit a copy of their most recent IRS return. If you or your parents are receiving SSI, SDI or any other type of financial assistance, please submit a copy of your and/or their year end report.**

Academic Information:

| | | | |
|------------------------------------------------------|------|-------|----------|
| Academic Major | | | |
| Career Goal | | | |
| College or High School Attended (attach Transcripts) | | | GPA |
| Address | City | State | Zip Code |
| College Accepted or Attending | | | |
| Address of College | City | State | Zip Code |

**DR. PREM REDDY FAMILY FOUNDATION
SCHOLARSHIP APPLICATION (CONT'D)**

Community Service or Extra Curricular Activities

Please list any experience with community, volunteer or church activities you have participated in during your school year or vacation time. For each category, list (1) type of work, (2) location, (3) name of supervisor, (4) their phone number, and (5) approximate total number of hours volunteered. Note: Use additional page if necessary

(1)

(2)

(3)

(4) (5)

(1)

(2)

(3)

(4) (5)

(1)

(2)

(3)

(4) (5)

All information furnished in support of this application is true and complete and if requested, I will submit proof of same. Failure to provide requested proof shall invalidate this application and result in termination of award. I also understand that:

- ◆ All applications must be filled out completely to be accepted by the review committee
- ◆ All applications will be kept confidential
- ◆ All applicants will be notified in writing in August as to the decision of the review committee

Applicant Signature _____