



West Alabama Rural Health Initiative Scholars Application

PERSONAL STUDENT INFORMATION (PLEASE PRINT CLEARLY)

LEGAL NAME:

Last First Middle Preferred Name

Email Address: _____

Permanent Mailing Address: _____
(Include street or PO Box, City, State, Zip)

County: (you live in) _____ Phone: _____ Date of Birth: _____

Gender and Ethnic Background

____ Male ____ Female

____ Black/Non-Hispanic ____ Hispanic ____ Native American ____ White ____ Other

EDUCATION:

High School (include City and County) Current Grade Level _____

Cumulative GPA: _____ Math and Science GPA: _____
Grade Point Average on a 4-point scale A=4, B=3, C=2, D=1, F=0

Check any science course (s) you have taken: ____ Biology ____ Chemistry ____ Other (Please list) _____

Teacher Recommendation: (1) _____ Class _____

Health Science Teacher Recommendation (2) _____ Class _____

Guidance Counselor Recommendation (3) _____ Class _____

PARENT'S EDUCATIONAL INFORMATION

Did either of your parents attend a junior college or 4-year institution?

Mother ____ Yes ____ No, If yes, where and highest degree _____

Father ____ Yes ____ No, If yes, where and highest degree _____

I certify that the information submitted in this application is completed and correct to the best of my knowledge. Please be sure to include your transcript and official test scores (ARMT) with your application.

Applicant's Signature and Date

I, the undersigned, give my permission for the school (Registrar or Principal) to release my son (grandson) (nephew)/ daughter (granddaughter) (niece)'s academic record, including grades and test scores, to help complete this application and, if selected, I give my permission for my son (grandson) (nephew)/ daughter (granddaughters) (niece) to participate in the WARHI Scholars Program.

Parent's/Guardian Signature _____ Date _____

T-Shirt Size _____

ADDITIONAL INFORMATION

(Additional pages may be used to answer questions)

Why do you want to be included in the West Alabama Rural Health Initiative Program as a WARHI Scholar?

Why do you think it is important to pursue a college degree?

Have you considered a profession in the health care industry? If so, what career and why?

Send application to Veronica Triplett, UWA Station 21, Livingston, AL 35470 or by email at vbeasley@uwa.edu. Application is due by Friday, April 28, 2017.