

CHOC Scholarship Application

Fall 2018

The Community Health Outreach Committee (CHOC) of Nursing and Allied Health (NAH) at South Texas College was established in the Fall of 2007. The purpose of CHOC is to strengthen and enhance NAH's connections with our community, including our community of NAH students. CHOC has raised funds and will continue to raise funds in order to provide scholarship opportunities for NAH students.

SCHOLARSHIP OVERVIEW:

- CHOC Scholarship applications are open to students accepted and currently enrolled in a health field of study at NAH/STC at the time of applying and awarded.
- A CHOC scholarship consists of a one-time annual payment. Scholarship amount: \$250
- The number of CHOC Scholarships are awarded in any given year is contingent on availability of funds.
- CHOC Scholarships will be awarded through the South Texas College Financial Aid Office.

ELIGIBILITY REQUIREMENTS:

- Applicants must be enrolled in the health field of study at NAH/STC at the time the scholarship is awarded.
- Applicants should demonstrate a financial burden that impinges school and learning. Include your letter with the application, letter must be typed.
- Applicants must submit a complete application package to include an official or unofficial transcript.
- Incomplete applications will **NOT** be considered.
- Former recipients are not eligible to apply.

SUBMISSION OF APPLICATION:

- Submit complete applications to the NAHC Dean's office 106 by 5 pm, Wednesday, November 9, 2018.
 - Applicant must submit the original application; signed and dated
 - A current official or unofficial transcript
 - A one-page letter stating the need for this scholarship (must be typed)
- Recipients will be chosen by an impartial selection committee and approved by CHOC members.

AWARDING INFORMATION:

- Selected recipients will be awarded Thursday, November 15, 2018 during the Harvest of Health Event.

CHOC Scholarship Application Fall 2018

Student Name: _____

STC ID: _____

Address: _____

City, ST, Zip _____

Mailing Address: _____

City, ST, Zip _____

Email address: _____

Phone number: _____

Program of Study: _____

Full-time student Part-time student

Student Status: First Year Second Year

Expected Graduation Date: _____

- Are you currently passing all courses? If no, explanation is required. (must be typed)
- Attach a copy of current transcript (official or unofficial).

Upon receiving the scholarship of Community Health Outreach Committee (CHOC) – South Texas College Nursing & Allied Health, I abide by the following:

- I give permission to CHOC to take my picture for CHOC files and notification to CHOC major contributors of scholarships. Students Initials _____

I acknowledge that the information herein is true and correct. I understand that I will be disqualified if I give any false information to obtain the CHOC scholarship.

Student Signature: _____

Date: _____

Do not forget to SIGN and DATE the APPLICATION