



CHCP High School Senior Scholarship Application

Applicant Information:

First Name: _____ Last Name: _____
Address: _____ City: _____
State: _____ Zip _____ Email: _____
Telephone: (_____) _____ - _____ High School: _____
Start Date: _____ Campus _____

Eligibility:

I attest that I (mark all that apply)

- am a Texas graduating High School Senior
- meet the current admissions requirements and have been accepted for admission to CHCP
- am a US Citizen, permanent resident, or dream act individual
- completed (and included) a 300-500 word essay, letter of recommendation, and current official HS transcript, with minimum cumulative GPA of 2.5
- will enroll and start my program by September 30, 2016

Additional Information:

Applicant essay must be 300-500 words (double spaced). The theme is: *Why I love health care and how I plan to use my health care education from CHCP to make the world a better place.*

Complete applications & essays can be submitted in one of the following ways:

- In person at the campus
- Via email to: scholarship@chcp.edu

Student Signature

Date

Scholarship submission deadline is the applicant's original expected start date. The CHCP Scholarship Committee will review all submissions to determine award recipients. Consideration will be given to academic achievement, essay submission, and letter of recommendation. Applicants will be notified of the Committee's decision by the 5th business day of the start period. High School Senior Scholarship funds are limited. Students eligible for multiple scholarships, institutional grants, and/or discounts will receive the one most beneficial as they cannot be combined.

