

## SCHOLARSHIP APPLICATION 2027-2087

**Deadline: March 1, 2027**

Please **type all** your answers.

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

DATE OF BIRTH (MM/DD/YY) \_\_\_\_\_ GENDER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

TELEPHONE NUMBER ( \_\_\_\_\_ ) \_\_\_\_\_

Mailing Address

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

\_\_\_\_\_ YES \_\_\_\_\_ NO Are you the first person in your family to go to college?

MAJOR \_\_\_\_\_ MINOR(S) \_\_\_\_\_

CUMULATIVE GRADE POINT AVERAGE (GPA) \_\_\_\_\_ (On a 4.0 scale)

\*GPA will be verified by the reviewing committee.

**For this section, you may attach your resume.**

- A. List any academic honors, awards, and membership activities while in college.
- B. List your hobbies, outside interests, extracurricular activities, and school-related volunteer activities.
- C. List your non-school-sponsored community volunteer activities.

**On a separate sheet, please state your need and why you merit a scholarship (500 words maximum).**

## STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above-stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship recipient, my picture may be taken and used to promote the MLS Department's scholarships.

I hereby understand that if chosen as a scholarship recipient, the scholarship will be applied directly to my student account at Andrews University in accordance with University policy.

I hereby understand that I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet the eligibility criteria will not be considered for scholarship awards.

**APPLICANT SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

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## Scholarship Awards Policy

### Philosophy

Scholarship monies funded through special contributions to and designated for Medical Laboratory Science (MLS) students will be awarded by the faculty of the Department of Medical Laboratory Sciences. All declared majors, regardless of race, creed, religion, or personal background, are eligible.

### Policy

Assigning departmentally awarded scholarships will be based upon the following criteria:

1. Evidence of exemplary character and citizenship.
2. Good scholarship, equal to or exceeding that which is required for entrance into the MLS Clinical Year Program.
3. Commitment to the Medical Laboratory Science profession.
4. Financial need.

### Review & Award Process

Applications will be reviewed and recipients selected by the MLS Faculty. Notification emails will be sent sometime during the summer. Applications may be downloaded from the Medical Laboratory Science Department Website at <https://www.andrews.edu/chhs/mls/>. Please submit any questions to: [mls@andrews.edu](mailto:mls@andrews.edu).