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## June C. May, MD Endowed Scholarship 2017-18 Deadline: May 12, 2017

Applicants must be full-time students with a declared major in a field relating to pre-health professions. Must submit a one-page essay regarding student's plans to complete a doctorate (MD or DO) and practice medicine.

Applicants must have completed a FAFSA for 2017-18 at time of application. GPA: 3.4 or higher

APPLICANT INFORMATION			E-mail Address:		
Name			N #	Date of Birth	
(Last)	(First)	(MI)			
Permanent Address					
	(Street)		(City)	(State) (Zip)	
Telephone	ρ	Are you a U.S. Citi	zen? 🗆 Yes 🖵 No	Are you an Oklahoma resident? 🖵 Yes 🖵 No	
Which NSU campus c			018?		
Which semester(s) w □ Fall & Spring □ F	•	to receive schola	rship assistance?		
What is your anticipa		nt status during 2	017-2018?		
🗅 Full Time 🗅 Part-T	ime				
Cumulative College G	GPA				
Cumulative College G Total college hours co	GPA ompleted afte	r Spring 2017:			
Cumulative College G Total college hours co Probable college maj Some NSU scholarshi	GPA ompleted afte or: ips are based o	or Spring 2017:		determine your financial need, please check	
Cumulative College G Total college hours co Probable college maj Some NSU scholarshi any statement below □ I am not currently	GPA ompleted afte for: ips are based of that applies to receiving subs	on financial need	. In order for us to	<b>determine your financial need, please check</b> parent(s), guardian(s), family member(s) or	
any statement below <ul> <li>I am not currently</li> <li>friend(s)and need ass</li> </ul>	GPA ompleted after for: ips are based of that applies to receiving subs istance to help ncially respons	on financial need to you. tantial financial a: o fund my college sible for the majo	<b>. In order for us to</b> ssistance from my education. rity of my living ar	parent(s), guardian(s), family member(s) or d school expenses (for example: rent, food,	

Signature of applicant \_\_\_\_\_\_ Date\_\_\_\_\_

Please return completed applications to: NSU Scholarship Office 701 N. Grand Ave. Tahlequah, OK 74464