***Biomedical Laboratory Diagnostics (BLD) Program***

***Scholarship Application Form***

|  |  |
| --- | --- |
| Name |  |
| MSU Email |  |
| Permanent Address |  |
| City/State/Zip Code |  |

Which degree are you pursuing?

* Biomedical Laboratory Sciences bachelor’s degree
* Clinical Laboratory Sciences bachelor’s degree
* Clinical Laboratory Sciences master’s degree
* Biomedical Laboratory Operations master’s degree

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| --- |
| For which semester(s) are you requesting support e.g. Semester/Year (e.g. Fall 2021) |
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|  |

Current class standing:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 🞏 | Freshman | 🞏 | Sophomore | 🞏 | Junior | 🞏 | Senior | 🞏 | Graduate |
| Are you eligible for financial aid? | | | | | | 🞏 | Yes | 🞏 | No |

Please complete the chart below for other colleges or universities you attended, whether degree seeking or not, and whether the degree completed or not. Add additional pages if needed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Institution name | City/State | Course of Study/Degree pursued | Year of degree conferral if degree was completed | GPA at end of studies at this institution |
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**Employment History:** Provide information regarding employment history including dates of employment, employer information, a brief position description, and hours per week. Please start with the most recent experience. Additional information may be attached if necessary.

|  |  |  |
| --- | --- | --- |
| Dates | Employer Information | Position Title/Description |
| \_\_\_\_\_/\_\_\_\_to\_\_\_\_/\_\_\_\_  (Month/Year)  Average hours per week: | Name:  City/state: |  |
| \_\_\_\_\_/\_\_\_\_to\_\_\_\_/\_\_\_\_\_  (Month/Year)  Average hours per week: | Name:  City/state: |  |
| \_\_\_\_\_/\_\_\_\_to\_\_\_\_/\_\_\_\_\_  (Month/Year)  Average hours per week: | Name:  City/state: |  |
| \_\_\_\_\_/\_\_\_\_to\_\_\_\_/\_\_\_\_\_  (Month/Year)  Average hours per week: | Name:  City/state: |  |
| \_\_\_\_\_/\_\_\_\_to\_\_\_\_/\_\_\_\_\_  (Month/Year)  Average hours per week: | Name:  City/state: |  |
| \_\_\_\_\_/\_\_\_\_to\_\_\_\_/\_\_\_\_\_  (Month/Year)  Average hours per week: | Name:  City/state: |  |

In the space provided, write a concise statement of your professional goals, both immediate upon degree completion, and longer term.

In the space provided, describe why you are applying for scholarship assistance. Describe particular personal or family financial concerns. Also describe how the scholarship will be used e.g. tuition, books, load reduction, etc.

I attest that the information provided here is true and accurate to my knowledge and all essays are entirely my original writing. I grant permission to the BLD Scholarship Selection Committee to review my academic record including transcripts from other institutions, financial aid status, and employment history for verification of employment.

|  |  |
| --- | --- |
| Signature: |  |
| Date: |  |

Revised 02/22