Now taking applications for the

Dr. Joseph Zaydon Scholarships

- **This Scholarship Fund will be used for scholarships awarded to qualifying students who are enrolled as full time students at Western Kentucky University.**

- **This award will be given exclusively to students who are entering into their Senior year at WKU studying <u>Pre-Medicine, Pre-Physician Assistant, or Nursing (BSN)</u>**

- **The main consideration for recipients of this scholarship is financial need and outstanding academic performance.**

- **Applicants will need to complete a WKU TOPDollar Scholarship application. Please visit: http://www.wku.edu/topdollar**

- **Applicants must also fill out a scholarship application and submit a short statement (two pages or less) that discusses your interest in medicine or nursing.**

- **Applications are available online. Please visit: http://www.wku.edu/chhs/current_students_info.php**

- **Submit application & statement via email to: chhs@wku.edu**

For more information on this scholarship,
please contact: chhs@wku.edu

All applications for this scholarship must be received by April 15, 2021

WKU®

College of Health and Human Services

Dr. Joe Zaydon Pre-Med, Pre-PA, and BSN Scholarship Application

Instructions: Please complete the application, save, email to chhs@wku.edu, and attach supporting application materials.

APPLICANT INFORMATION

Name:	
WKU ID Number:	
Local address:	
Mailing address: (if different than above)	

City:	State:	ZIP Code:
Local Phone:	E-Mail Address:	

WKU INFORMATION

Major:	Minor:
Overall GPA: _____(minimum 3.5)	Earned Credit Hours: _____(minimum 70)

SUPPORTING APPLICATION MATERIALS

Please attach a short statement (two pages or less) that discusses your interest in medicine or Nursing. Be sure to include the following in your essay:
1. Describe your career goals.
2. Describe any clinical experiences in medicine or nursing.

FOR MORE INFORMATION ON THIS SCHOLARSHIP, PLEASE CONTACT:

chhs@wku.edu

SIGNATURE

By checking the box below, I grant approval to authorize the verification of the information provided on this form. I agree that typing my name in the signature box shall serve as my signature.

Signature of applicant:	Date:

ALL APPLICATIONS FOR THIS SCHOLARSHIP
MUST BE SUBMITTED TO chhs@wku.edu
RECEIVED BY April 15, 2021.