



## **Jason & Kristen Kerr Health Care Scholarship Application**

The Jason & Kristen Kerr Health Care Scholarship is sponsored by the generous donations from the Ron and Linda Jones Family Foundation. This scholarship is awarded each year to a student who has excelled academically in a major in preparation for a career in the medical or nursing fields. The applicant must be a rising senior, should display leadership attributes at school, in the community and/or the church and demonstrate the need for financial assistance.

### **Requirements:**

1. Have a cumulative GPA of 3.5 or higher
2. Be a rising senior
3. Have selected a major which serves as a prerequisite for graduate studies in the medical or nursing fields
4. Be enrolled in Institute
5. Live within the honor code and dress code
6. Complete an essay, no longer than two pages double spaced, stating why you chose your major and what your plans are for incorporating your studies and talents into your career
7. Submit a letter of recommendation from a professor in your major.
8. Provide details of previously demonstrated leadership in the church, community and/or school activities
9. List other scholarships you are applying for, other scholarships you have been awarded and why you need additional financial assistance

**Deadlines:** March 1<sup>st</sup>

**Application Instructions:** Deliver, email or mail completed application and all required attachments to:

**Director of Financial Aid  
Southern Virginia University  
One University Hill Drive  
Buena Vista, VA 24416**

**PERSONAL DATA:**

NAME: \_\_\_\_\_ STUDENT ID: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_

PRIMARY PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

**EDUCATION:**

NEXT SCHOOL YEAR, I WILL BE A: SOPHOMORE \_\_\_\_\_ JUNIOR \_\_\_\_\_ SENIOR \_\_\_\_\_

ARE YOU A RETURNING STUDENT \_\_\_\_\_ TRANSFER STUDENT \_\_\_\_\_

CUMULATIVE GPA: \_\_\_\_\_ TOTAL CREDITS EARNED: \_\_\_\_\_

MAJOR: \_\_\_\_\_

2<sup>ND</sup> MAJOR OR MINOR (IF ANY): \_\_\_\_\_

ANTICIPATED GRADUATION DATE: \_\_\_\_\_

DID YOU ATTEND INSTITUTE THIS PAST FALL? \_\_\_\_\_ THIS SPRING? \_\_\_\_\_

**FINANCIAL NEED:**

A. ESTIMATED EXPENSES (Tuition, Room and Meals) FOR NEXT YEAR: \_\_\_\_\_

B. ESTIMATED SCHOLARSHIPS & GRANTS EXPECTED FOR NEXT YEAR: \_\_\_\_\_

C. AMOUNT OF STUDENT LOANS EXPECTED TO APPLY FOR NEXT YEAR: \_\_\_\_\_

D. AMOUNT EXPECTED TO PAY FROM PERSONAL EARNINGS: \_\_\_\_\_

E. FINANCIAL NEED (A minus B minus C minus D): \_\_\_\_\_

LIST OTHER SCHOLARSHIPS YOU ARE APPLYING FOR:

\_\_\_\_\_

\_\_\_\_\_

## ACADEMIC HONORS:

Briefly list or describe any scholastic distinction or honors you have won since ninth grade (e.g., National Merit, Cum Laude Society, etc.)

<i>Honor Received</i>	<i>Grade Level</i>	<i>Description</i>

## EXTRACURRICULAR AND WORK EXPERIENCE:

Please list your extracurricular, personal, and work accomplishments. Include specific events and/or major accomplishments such as musical instruments played, club memberships, performances, etc.

<i>Activity</i>	<i>Grade Level</i>	<i>Description</i>

## LEADERSHIP EXPERIENCE:

Please list your church, community and/or school leadership experiences.

<i>Position Held</i>	<i>Grade Level</i>	<i>Description</i>

## SERVICE EXPERIENCE:

Please list any volunteer positions you've held or service projects you've participated in from the last 3 years.

<i>Position or Activity</i>	<i>Grade Level</i>	<i>Description</i>

**LETTER OF RECOMMENDATION/STATEMENT OF ENDORSEMENT:**

Provide a letter of recommendation from a current faculty member in your major and include it with this application.

NAME OF PROFESSOR: \_\_\_\_\_

**PERSONAL ESSAY:**

Write an essay, no longer than two pages double-spaced, stating why you have chosen your major and what your plans are for incorporating your studies and talents into your career. Attach your personal essay to this application.

**CERTIFICATION:**

I certify that all information on my application, including my personal essay, is my own work, factually true and honestly presented. I hereby grant permission to the Office of Financial Aid to verify such information and to release information to the donor or potential donor of any scholarship for which I may be eligible.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)