**Adrienne Corti Memorial Scholarship**

**Application**

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| **Applicant’s Name** |  |
| **Student ID:** |  |
| **Current Address:** |  |
| **Telephone:** |  |
| **Email:** |  |
| **Current undergraduate or graduate degree program** |  |
| **Expected program completion date (month/year)** |  |
| **Educational Background, including high school, undergraduate, and graduate, as appropriate. Include name and location of schools, dates attended and degree or diplomas earned:** | |
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**In addition to this application form, please submit:**

* An essay in which you describe a) your interest in pursuing the WEMT certification b) how you plan to use this certification in future endeavors, and c) how this scholarship will benefit you and/or others
* Unofficial transcripts of all college and university work
* 2-3 letters of support
* List of activities, volunteer service, awards, accomplishments

Deadline for application is **5:00pm on April 1 of each year**. Deliver your completed application to Luke Alford, Department of Health and Human Performance, McGill Hall 101