

# Santa Fe Indian School Medical Pathways Scholarship

In partnership with the LANL Foundation and Anchorum St. Vincent

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Mailing Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Social Security No.: \_\_\_\_\_ What year did you graduate from SFIS? \_\_\_\_\_

## Post-Secondary Education

University /College: \_\_\_\_\_

Institution Address: \_\_\_\_\_

Major/Field of study: \_\_\_\_\_ Current Cumulative GPA: \_\_\_\_\_

Degree seeking:  Associates  Bachelors  Masters  Doctorate

## Health Careers Scholarship

### Medical Pathways Scholarship **Required** Documents

- Transcripts (from last attended institution)
- Class Schedule for the fall 2021 and Spring 2022 semester
- Two (2) Letters of Recommendation
- Complete the [SFIS Health Careers Program Alumni Survey 2021](https://forms.gle/Zp5qoUji2PLGMqyv7) <https://forms.gle/Zp5qoUji2PLGMqyv7>
- Typed essay, which includes the following:
  - A short introduction (name, pueblo/ tribe, years attended SFIS)
  - How the your health career choice may potentially impact health care in your community.

## Disclaimer and Signature

*I acknowledge that I am currently attending an accredited college/university or established vocational institution full-time with a GPA of 2.5 or above.*

*I understand that students who are awarded a scholarship will receive \$2000.00 for the school year. Scholarship funds will be distributed in two (2) installments: \$1000.00 per semester to the student. Recipients will receive the Fall and Spring installments at the beginning of the Spring 2022 Semester. Recipients need to be in good standing with a 2.5 GPA and enrolled as full-time student to receive the Spring disbursement.*

*I certify that the information and documentation that accompanies this application are true and correct to the best of my knowledge. I understand that false or misleading information may result in disqualifying my application.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_