

# LOGAN UNIVERSITY

## JOHN R. HOWELL, DC MEMORIAL SCHOLARSHIP

This scholarship is \$500 and will be awarded to one (1) student in the 2016 summer trimester. The recipient will be selected through a blind selection process. Qualified applicants must demonstrate satisfaction of the following scholarship and application criteria:

### Scholarship Criteria:

1. Must be from the state of Arkansas
2. Currently enrolled trimester 6 through 9 Doctor of Chiropractic (DC) student
3. Cumulative DC GPA of 2.0 or higher

### Application Criteria:

1. Completed application in full detail
2. Complete a short personal story about your life and future goals (please provide **only** your student identification number, no name, in the upper right hand corner)

**Completed application and criteria documents must be submitted to Laurel Miller, [laurel.miller@logan.edu](mailto:laurel.miller@logan.edu), by March 18, 2016 at 3:00 pm.**

*Scholarship recipients will be required to write a personal letter of thanks to the individual or group that made this scholarship available. The Scholarship recipient will be recognized at the 2016 Spring Symposium Luncheon.*

Name: \_\_\_\_\_ Trimester: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

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

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

**NOTE: By signing this application, you also give Logan University permission to release your scholarship information to the donor(s).**

**FOR OFFICE USE ONLY:**

Trimester: \_\_\_\_\_ GPA \_\_\_\_\_ Short Story: \_\_\_\_\_

Arkansas Native: \_\_\_\_\_

Effective Family Contribution (EFC): \_\_\_\_\_

(The dollar amount the Department of Education has determined the student is able to pay toward their cost of education)

Amount of financial aid for trimester: \_\_\_\_\_

Unmet Need: \_\_\_\_\_