

# LOGAN UNIVERSITY

## FOREVER CHIROPRACTIC, FOREVER LOGAN SCHOLARSHIP

*Forever Chiropractic, Forever Logan was established in 2015, by Logan University's president, Dr. J. Clay McDonald. Forever Chiropractic, Forever Logan is funded through the generous support of donors to Logan University, donating specifically to this scholarship program. The criteria of this endowment fund allows for immediate scholarships, as well as the growth of the scholarship endowment. The anticipated success of Forever Chiropractic, Forever Logan will provide for both today's and future generations of Logan chiropractic students, bridging the chiropractic past with our present and most importantly the future of chiropractic health care.*

This is a one-time, at minimum, \$5,000 scholarship, to be awarded to a qualified student(s) in the 2021 summer trimester. The recipient(s) will be selected through a blind selection process. Qualified applicants must demonstrate satisfaction of the following scholarship and application criteria:

### Scholarship Criteria:

1. Currently enrolled trimester 2 through 9 Doctor of Chiropractic (DC) student
2. Cumulative DC GPA of 3.0 or above
3. Must maintain academic integrity
4. Must not have been or be in a probation status

### Application Criteria:

1. Completed scholarship application in full detail
2. Letter of support from a practicing Doctor of Chiropractic
3. Completed 500 word essay describing how the applicant plans to give back to the chiropractic profession or Logan University after graduation.

**Completed application and criteria documents must be submitted to Laurel Miller, [laurel.miller@logan.edu](mailto:laurel.miller@logan.edu), by January 19, 2021 at 3:00pm.**

*Scholarship recipient(s) will be required to write a personal letter of thanks to the individual or group that made this scholarship available. The Scholarship recipient(s) will be recognized at the 2021 Spring Symposium Luncheon.*

Name: \_\_\_\_\_ Trimester: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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:**

Application: \_\_\_\_\_ GPA: \_\_\_\_\_ Essay: \_\_\_\_\_ Letter of Support: \_\_\_\_\_