



The Medical Center at Scottsville Scholarship

The Medical Center at Scottsville Scholarship was established through a gift made by The Medical Center at Scottsville.

The scholarship is for the Fall 2024–Spring 2025 academic year, and will be the amount equivalent to in-state tuition and an allowance for books. It may be awarded to one student or divided between two students. The scholarship will be payable over two semesters.

To qualify for The Medical Center at Scottsville Scholarship, applicants must meet the following criteria:

- Graduate of Allen County-Scottsville High School.
- Beginning freshman at Western Kentucky University and enrolled in full-time classes by the fall semester in which the scholarship is awarded.
- Recipients must have a cumulative GPA of at least 3.0 in the fall semester to receive the scholarship for the spring semester.

Turn in completed application and accompanying documents to the Senior Guidance Counselor at Allen County-Scottsville High School, or mail to:

Med Center Health
ATTN: Amy Hardin
800 Park Street
Bowling Green, KY 42101

Application and accompanying document due by **Friday, March 15, 2024**

Please email to Amy Hardin, Executive Director, at hardac@mchealth.net, or call 270.745.1535 with any questions.

**** Applicants will not be considered if all requested information is not included****

The Medical Center at Scottsville Scholarship Application

Section A: Personal Information

Name: _____ Age: _____

Home Address: _____

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____

Section B: High School - to be completed by High School Guidance Counselor

High School Name and Location: _____

High School Graduation (month/year): _____

Which state diploma are you receiving? _____

Sixth Semester Rank/Class Size _____/_____

Seventh Semester Rank/Class Size _____/_____

Cumulative GPA on Unweighted 4.0 Scale: Sixth Semester _____

Seventh Semester _____

ACT Scores: Date: _____ EN _____ RE _____ SC _____ COM _____

Number of Advanced Placement (AP) classes taken and/or in progress: _____

Number of honors classes taken and/or in progress: _____

Indicate if student is:

_____ National Merit/National Achievement Semi-finalist

_____ KY Governor's Scholar

_____ GS Arts

_____ Gatton Academy of Math and Sciences

Guidance Counselor Signature _____ Date: _____

Section C: College

Will you be a full-time student at WKU? Fall Semester 2024 Yes ___ No ___

Spring Semester 2025 Yes ___ No ___

Academic Major: _____

Anticipated Graduation Date: _____

Have you or will you apply for financial aid? Yes ___ No ___

Are you a recipient of any other scholarships/grants? Yes ___ No ___

(Include KEES funding or estimated amount)

If you answered yes, please complete:

Name of Scholarships/Grant and Amount(s) awarded– *do not summarize but identify each amount individually*: _____

Section D: Activities - Please indicate years of membership and leadership positions.

Membership in school activities (High School and/or College):

Membership in non-school activities (community, church, civic, employment, etc.):

Honors and Awards:

Section E: Supporting Documentation – Please attach the following documents.

- One-page essay explaining your financial need and why you should be awarded the scholarship.
- Official copy of your high school transcripts, including your cumulative grade point average.
- Please make sure ACT scores are included on the transcript.
- Three letters of reference (i.e. Principal, Counselor, Teacher, or Employer).
Please be sure to have your references include their phone number on the letter.

***Applications submitted without the required documentation will not be considered.**

Student Signature _____ Date _____