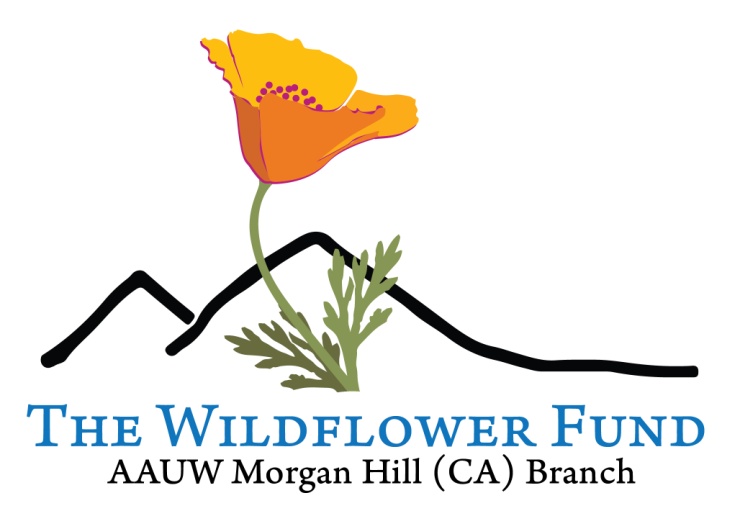
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**Lauren Jenkins Healthcare Scholarship**

**for the**

**2020-2021 Academic Year**

***Applications Due: March 1, 2020***

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**providing local scholarships for women**

**AAUW Morgan Hill Lauren Jenkins Healthcare Scholarship**

**for the 2020-21 Academic Year**

**Information**

**About Lauren Jenkins (1958-2015)**

This scholarship is in honor of Lauren Jenkins, a geneticist and former member of AAUW Morgan Hill. Lauren believed in the advancement of women and girls through education and actively worked with them to advance their goals. Lauren was the founder of Girls Engaged in Math and Science (GEMS).

**Eligibility**

The American Association of University Women (AAUW) Morgan Hill Branch is offering scholarships to women who meet the following criteria: they have been accepted into college based program that results in a healthcare license (such as nursing, laboratory, pharmacy, radiology); they live or have lived in Morgan Hill or have attended a Morgan Hill school. Additionally, students from Gilroy, San Martin and Hollister will be considered for the 2020-21 school year. Proof of enrollment for fall of 2020 will be required in order to receive the funds. Awards may range from $500 to $2000.

***Completed applications must be received by March 1, 2020.***

**Instructions**

* **Complete and print the following** **application**. Be sure to sign the application.
* **Obtain copies of grade reports or transcripts** for work completed at all colleges attended, including your latest work at your current college.
* **Write a personal statement** (not more than one page). Please address the following:
* Why do you feel you should be selected for this scholarship? How will this scholarship assist you in reaching your career goals? Describe any barriers, obstacles or experiences you have encountered in pursuit of your goals.
* Describe activities outside the classroom that have contributed to your personal growth. Examples might include employment, family responsibilities, club memberships or community service. Include any leadership roles you have had and any recognition you have received for those efforts.

* **Mail your application, grade reports and personal statement** to the following address:

AAUW Morgan Hill, Lauren Jenkins Scholarship Committee

P.O. Box 1528

Morgan Hill, CA 95038

**Or email your application, grade reports and personal statement** to:

healthcare@aauwmh.org

* **Save the date, Sunday, March 29, 2020 at 10 am,** Live Oak High School, Morgan Hill. Scholarship winners will be introduced to the community and our membership at the Wildflower Run, our annual scholarship fundraising event.

**Selection of Recipients**

The purpose of this scholarship is to support women pursuing careers in healthcare. Selection of the recipients is based on academic commitment, goals, a genuine financial need and a connection to the South County area. Other factors, such as community service and leadership will be considered. ***The recipients selected for the scholarship will be notified by April 1, 2020.***

***Questions?*** *Email healthcare@aauwmh.org*

**AAUW Morgan Hill Lauren Jenkins Healthcare Scholarship**

**for the 2020-21 Academic Year**

**Application**

1. **Information about you**

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

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

City / Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. **College Information**

College currently attending/accepted to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total number of units completed \_\_\_\_\_\_\_\_\_\_ Current GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Student release authorization**

*I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [your full name] hereby authorize release of any relevant information (application information and transcripts) as required by the AAUW Scholarship Selection Committee. I certify all information provided here to be true and accurate to the best of my knowledge.*

Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_