CHI BOULE SOCIAL ACTION SCHOLARSHIP FOR NASHVILLE HBCU STUDENTS

2012 APPLICATION
CHI BOULE SOCIAL ACTION SCHOLARSHIP
Summer 2012 Application

APPLICANT INFORMATION

Name: __________________________________________________________

Address: ______________________________________________________
______________________________________________________________
______________________________________________________________

Phone: ___________________________ Email: ________________________

EDUCATION

High School: ___________________ City: ___________________ Graduation Date: __________

College/University: ___________________ Graduation Date: _______ Degree_____

Graduate School: ___________________ Graduation Date: _______ Degree_____

AWARDS

Please describe any awards or honors you have received:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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PRIOR COMMUNITY OR SOCIAL ACTION ACTIVITIES

Please describe your most significant activities (include paid, volunteer or intern positions):

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

COLLEGE ORGRADUATE SCHOOL EXTRA-CURRICULAR ACTIVITIES:

Please note any offices or leadership positions held:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

DESCRIPTION OF SUMMER SOCIAL ACTION PROJECT

On a separate sheet, describe your proposed summer social action project. Include the population or issue it will address, the time frame for its completion, the resources (organizations or persons) that will assist you, and your motivation for embarking on the project.
Name: __________________________________________________________

ADDITIONAL REQUIRED INFORMATION

Please provide: a letter of recommendation from an adviser or school official with direct knowledge of your proposed project; an official copy of your current academic transcript; and a letter from your school’s financial aid office documenting your need for scholarship assistance. These materials and your completed application must be submitted by March 1. An interview may be requested.

RECOMMENDATION

Please give the name of an adviser or school official with direct knowledge of your proposed project

Name: __________________________________________________________

Address: _______________________________________________________

___________________________________________________________________

___________________________________________________________________

SUBMISSION

Mail all materials to:

Walter K. Clair, MD, MPH
Vanderbilt Heart and Vascular Institute
1215 21st Avenue South
Nashville, TN 37232-8802
wkclai@aol.com