**ROSEMARY AMOS SCHOLARSHIP APPLICATION**

**College of Education, Health and Human Services**

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deadline for submitting an application is **February 15.**

**Purpose of The Scholarship**

Rosemary Rita Amos, Ed.D., M.P.H was a faculty member in the Department of Allied Health Sciences (now Health Education and Promotion) from 1970 to 1978 at Kent State University. She was the department's first chairperson , holding the position from 1970 to 1974. She was not only a fine teacher, but her generosity was known to a number of students. The *Rosemary Amos Scholarship* was established by Mrs. Mary Amos, Rosemary’s mother to both perpetuate her memory but also the principle of aiding students with financial need.

**Criteria for Eligibility**

1. Must be enrolled as a Community Health Education, Health & Physical Education or School Health Education major in the College of Education, Health and Human Services; preference for award recipient to be an undergraduate student
2. Must demonstrate financial need; your most recent FAFSA will be used to determine need
3. Must be in good academic standing

**Application and Review Process**

1. Complete this application
2. Prepare **typed responses** the following questions***:***
	1. List your volunteer service/experiences (please include dates).
	2. What are your career goals?
	3. Explain why you feel you should be awarded a scholarship.
3. Submit the completed application and typed essay response by **Feb 15th.**
4. All submitted applications will be reviewed for match with the intended purpose of the scholarship.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Kent State ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ KSU Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@kent.edu

Permanent Address­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 No. & Street City State Zip

Indicate your ***current*** class standing: FR \_\_\_ SO \_\_\_ JR\_\_\_ SR \_\_\_ Master’s\_\_\_ EdS \_\_\_ PhD \_\_\_

Official Declared Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Cumulative GPA \_\_\_\_\_\_ Total Credit Hours **at end of Current Semester** \_\_\_\_\_\_

Please indicate the percentage of funding for college expenses (tuition, books, room, board, miscellaneous expenses). The total should equal 100%.

Parents \_\_\_\_\_\_ Loans \_\_\_\_\_\_ Federal Grants \_\_\_\_\_\_ Self \_\_\_\_\_\_ Scholarships \_\_\_\_\_\_

Are you currently employed? Yes \_\_\_\_ No \_\_\_\_ If yes, approximately how many hours do you work per week? \_\_\_\_\_

Please indicate the percentage of funding for college expenses (tuition, books, room, board, miscellaneous expenses). The total should equal 100%.

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Parents \_\_\_\_\_\_ Loans \_\_\_\_\_\_ Federal Grants \_\_\_\_\_\_ Self \_\_\_\_\_\_ Scholarships \_\_\_\_\_\_

Are you currently employed? Yes \_\_\_\_ No \_\_\_\_ If yes, approximately how many hours do you work per week? \_\_\_\_\_

Return application and essay by the due dates above to:

Laura Riddle

409 White Hall

Kent, OH 44242