

**AzHOSA Foundation  
&  
AzHOSA Scholarship Application**

Date:

Name:  AzHOSA Division: Secondary or Postsecondary

Home Address:  Email Address:

Phone Number:

Current School:  School Address:

---

**1. Transcript Information** (20 points maximum)

Number in Class:  Rank in Class:

Indicate Grade Point Average (GPA)

Indicate SAT and ACT scores, if available. (if not available, leave blank)

On a 4.0 non weighted scale  
If Honor Program, please convert your GPA to a 4.0 scale

Critical Reading  Math  Writing  ACT cumulative score

---

**2. Further Education Intent - Career Goals** (Be specific as to career area, i.e. nurse, doctor, physical therapist, etc...)

Career Goals

Have you been accepted to a postsecondary or collegiate program to pursue your education as of this submission? (yes or no)

If yes, please provide institutions name:  If no, indicate where you have applied:

If you are enrolled in a postsecondary or collegiate program provide the name of the institution:

List awards, honors or educational societies that indicate the quality of your academic performance:

---

**3. References** (9 points maximum)

List the names of person submitting the letter for each category below:

a.) A Teacher, Advisor, Principal or Director of Health Science Program:

b.) An employer or community leader:

c.) Any other sources other than a relative:

---

**4. Statement of Need** (6 points maximum)

Applicants must attach a typed letter demonstrating your financial need for tuition and expenses. Please include your best estimate of expenses and any other sources of income (i.e. grants, loans, scholarships, salary/wages, etc.).

**5. Leadership Activities** (30 points maximum)

List AzHOSA and/or other leadership positions you have held, activities you have been involved in, and a clear statement of your leadership responsibilities and commitment for each. If additional space is needed, attach a typed sheet of paper.

Year	Office Held or Committee	Responsibilities

**6. Community Involvement** (15 points maximum)

List community activities (other than AzHOSA or school activities) that you were involved and/or awards received. If additional space is needed, attach a typed sheet of paper.

Year	Organization Involved	Responsibilities

**7. Essay/Personal Statement** (20 points maximum)

Please submit a one page statement describing why you want to be a healthcare professional and how HOSA has influenced that decision.

**8. Resume** (15 points maximum)

Please attach a current resume - not to exceed two pages.

**Checklist:** Be sure to organize your application according to the checklist below. Include all the following information in one envelope.

- 1. Application
- 2. Career Plan
- 3. References
- 4. Statement of Need
- 5. Leadership Activities
- 6. Community Involvement
- 7. Essay/Personal Statement
- 8. Resume
- 9. Statement of Scholarship Choices