

APPLICATION FOR COE FOUNDATION SCHOLARSHIP

Dear Applicant:

Each year \$3,000.00 is given to the recipient of the Coe Foundation Scholarship. To be eligible for this scholarship, the applicant must be a graduating senior and must live in the West Park Hospital District. The scholarship is only available to students who plan to major in pre-med or nursing.

All scholarship applications must be received at the following address BEFORE May 1st.

Mail to:

Cody Medical Foundation
1108 14th Street #422
Cody, Wyoming 82414

NAME _____ ADDRESS _____

AGE _____

PARENTS _____ PARENTS' OCCUPATION _____

GPA _____ TEST SCORES _____

MAJOR FIELD OF STUDY CHOSEN _____

OTHER SCHOLARSHIPS RECEIVED _____

HOW DO YOU PLAN TO FINANCE YOUR EDUCATION? _____

WHY HAVE YOU CHOSEN TO GO INTO MEDICINE? (Do not write on the back of this application. Use additional pages if necessary.)

WILL YOU CONTINUE THIS COURSE OF STUDY THROUGHOUT YOUR COLLEGE CAREER? _____

WHAT COLLEGE DO YOU PLAN TO ATTEND? _____

CAN YOU BE AVAILABLE FOR AN INTERVIEW? _____

ATTACH THREE LETTERS OF REFERENCE FROM PEOPLE WHO RESPECT YOU AND KNOW OF YOUR CHARACTER. DO NOT SUBMIT MORE THAN THREE REFERENCES.

PLEASE ATTACH A PICTURE OF YOURSELF TO THE FRONT PAGE.