



NAPLES INTERAGENCY SCHOLARSHIP APPLICATION

The goal of Naples Interagency Scholarship program is to encourage students to pursue careers in healthcare, social or human services to benefit the citizens of Collier County. Applications should be postmarked no later than midnight October 15, 2023 for consideration. Recipients will be notified in late October of their award status. Graduate work is available for scholarship.

Scholarship eligibility award will be for healthcare related Vocational/Trade/College (undergraduate school) education.

APPLICATION REQUIREMENTS

- 1) Applicants must have a minimum of or attaining a high school diploma within 9 months of applying, a GED, or be accepted into a qualified program at the discretion of the board.
- 2) Applicants must have maintained a GPA of 2.5 or higher on all transcripts.
- 3) Applicants must demonstrate active participation/interest in the healthcare fields and provide a service to the community.
- 4) Applicants must be recommended by someone from a field related to health or any medical association, a Letter of Recommendation must be submitted from that individual.
- 5) Copies of official school transcripts from all high schools, trade/vocational or colleges attended in the last 4 years, whichever applies (high school transcripts from school where diploma was received).
- 6) **Note:** Transcripts must be provided directly (via scan) to the Scholarship Committee at naplesinteragency@gmail.com
- 7) Prepare a typed short introduction including your background, education, financial need, community involvement and any other pertinent information that will allow our committee to get to know you.
- 8) Please complete a typed short essay on one of the following topics:
 - How has healthcare positively or negatively affected you or a family member?
 - How have you responded to the needs of an individual in your community?
 - How has a particular individual, (role model/parent/teacher, etc.,) impacted your journey in life?
- 9) Applicants must be a COLLIER COUNTY resident, have no criminal background. Please include a copy of your Florida issued ID or Driver's License.
- 10) Annual Scholarship awards do not renew. You must apply annually in order to be considered for all scholarships.

Any applications that are incomplete will not be considered



INSTRUCTIONS FOR SUBMITTING APPLICATIONS:

***PLEASE TYPE INFORMATION BELOW AND INCLUDE ALL ITEMS REQUIRED FROM LIST ABOVE INCLUDING THIS APPLICATION.**

Personal Information

Name: _____

Address: _____ **City:** _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____

Email Address: _____

Date of Birth: _____ **Marital Status:** _____

Of Children: _____ **Names & Ages of Children:** _____

Employer: _____ **Phone:** _____

Position: _____ **Years in Position:** _____

High School Attended: _____ **State:** _____ **Graduation Date:** _____

Current Relative Activities _____

College/Trade/Vocational School Attended: _____

City _____ **State:** _____ **Major:** _____

Present Educational Institution: _____ **Full Time:** ___ **Part Time:** ___

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Course of Study: _____ **Expected Date of Graduation:** _____

Credit Hours Define You As: (Circle One) Freshman Sophomore Junior Senior

I authorize the release of this application and any relevant supporting information to persons involved in the selection of scholarship recipients.

Please Return Application Along With ALL Supporting Documents By October 15, 2023:

Tom Roberts, Scholarship Chairman, Naples Interagency
naplesinteragency@gmail.com

<p>FOR INTERNAL USE ONLY: Date Received: _____ Status: _____</p>
