



Cultural Diversity Scholarship

PERSONAL INFORMATION

Name: _____

Address: _____

Phone: _____ Email: _____

Degree Program: _____ Year Admitted: _____ FAFSA filed: y / n

Ethnicity: ___ African American ___ Hispanic American ___ Native American/Alaskan Native

 ___ Caucasian/White ___ Asian American ___ Middle Eastern

 ___ Other - please specify _____

APPLICATION ESSAYS (each essay should be 300 words or less)

1. Describe how your culture and/or ethnicity influences your desire to pursue graduate work at Mars Hill Graduate School.
2. How will you use your educational experience at Mars Hill Graduate School to contribute to your culture or across cultures?
3. Outline your personal and professional goals and what steps you will take to increase ethnic representation in the counseling, divinity and/or church leadership. Feel free to include any previous accomplishments relevant to increasing awareness about diversity in your community.

ELIGIBILITY CRITERIA

Students who meet with following criteria are invited to apply:

1. First year and returning students attending fall 2010-2011.
2. Must be intending to enroll in a degree program full-time (at least 8 credits not including audit or enrichment).
3. Completed the Free Application For Student Aid (FAFSA).

SCHOLARSHIP TERMS

- With the exception of the FFELP aid, MHGS Cultural Diversity Scholarship is not combinable with any other institutional scholarships.
- Recipients who drop below full time status or withdraw from active enrollment may bear responsibility for full repayment of all tuition assistance funds paid for the trimester.
- Students who are not selected to receive the award may compete in subsequent years, but no student is guaranteed to receive the award more than once.
- The rules and regulations governing other sources of financial aid (federal, state, institutional and other grants, gifts or loans) will apply.

I certify that the statements made in this application are true and that I have read and am familiar with eligibility requirements and scholarship terms. I hereby grant permission to the scholarship review committee to review such documents as necessary to make a determination of my qualifications, including but not limited to, my admissions application, my Student Aid Report, and my academic transcript.

Applicant's Signature: _____ Date _____

Please return this application before June 15th to:
Mars Hill Graduate School, Attn: Student Financial Services,
2501 Elliott Avenue, Seattle, WA 98121