

APPLICATION FORM

Student Name: _____

Due Date: April 16, 2018

SERTOMA SCHOLARSHIP

1. Pursue studies in one of the health science related fields.
2. Scholarship recipients will receive \$1,000 at the beginning of their sophomore year in college provided they have retained a major in one of the health sciences.
3. Please answer the following: **WHY I CHOSE A CAREER IN HEALTH SCIENCES.**