## Biomedical Laboratory Diagnostics (BLD) Program Scholarship Application Form

Name				
MSU Email				
Permanent Addre	SS			
City/State/Zip Co	de			
☐ Medical Labe ☐ Clinical Labe ☐ Biomedical I ☐ Biomedical I For which semes	Laboratory Science oratory Sciences boratory Sciences material materials and the control of the	naster's degree ions master's degree e master's degree equesting support	•	
e.g. Semester/Y	<u>ear (e.g. Fall 202</u>	21)		
	- enter number of	rgraduate. If underg credits completed b	raduate, enter credits efore Fall:	completed
Are you eligible for financial aid?			□   Yes   □	No
-		_	universities you atten ted or not. Add additi	
Institution name	City/State	Course of Study/Degree pursued	Year of degree conferral if degree was completed	GPA at end of studies at this institution

**Employment History:** Provide information regarding employment history including dates of employment, employer information, a brief position description, and hours per week. **Please start with the most recent experience.** Additional information may be attached if necessary.

Dates	Employer Information	Position Title/Description
/to/ (Month/Year) Average hours per week:	Name: City/state:	
to(Month/Year) Average hours per week:	Name: City/state:	
	Name: City/state:	
to(Month/Year) Average hours per week:	Name: City/state:	
	Name: City/state:	
/to/ (Month/Year) Average hours per week:	Name: City/state:	

In the space provided, write a concise statement of your professional goals, both immediate upon degree completion, and longer term.					
In the space provided, describe why you are applying for scholarship assistance. Describe particular personal or family financial concerns. Also describe how the scholarship will be used e.g. tuition, books, load reduction, etc.					

I attest that the information provided here is true and accurate to my knowledge and	all
essays are entirely my original writing. I grant permission to the BLD Scholarship Select	ion
Committee to review my academic record including transcripts from other institutio	ns,
financial aid status, and employment history for verification of employment.	

Signature:		
Date:		

Revised 02/22