

**Mental Health America Lakeshore**

**2024 Scholarship Application**

Scholarship amount: $1500

Deadline: All applications must be received/postmarked by Friday, March 15, 2024.

Please return completed application to:

Andrea Fischer, Education Specialist

Mental Health America Lakeshore

410 S. Milwaukee Street, Plymouth, WI 53073

Criteria: Graduating high school seniors entering either college or technical school may apply. All applicants must attend a high school located in Sheboygan County and/or live within Sheboygan County, and intend to pursue a degree/career in a field **directly** related to mental health, including but not limited to psychology, counseling, social work, psychiatry, psychiatric nursing, etc. Applicants should have a minimum 3.0 grade point average on a 4.0 scale. The ideal applicant will be an active participant in their school, their community, and the MHA Student Ambassador Program*.*

The scholarship recipient will be officially informed at the school’s scholarship recognition ceremony. The recipient must maintain a minimum 3.0 grade point average during the first semester of their post-secondary study. The scholarship funds will be awarded when the recipient has provided proof of completion of one semester of post-secondary study in a major related to mental health.

***Please remember to sign the application. Incomplete/illegible applications will not be considered.***

Applicant’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College/technical school you plan to attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major area of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current GPA: \_\_\_\_\_\_\_\_\_\_\_on a \_\_\_\_\_\_\_\_\_\_ scale

**Please respond neatly to the following statements. Please use additional paper if needed.**

1. Describe your involvement in school activities, including length of participation and any leadership positions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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2. Describe your community involvement, including length of participation and any leadership positions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3. Are you involved in the MHA Student Ambassador Program? If so, please describe how you have promoted mental health and wellness within your school/community:

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4. Describe your work experience(s) including responsibilities and place(s) of employment:

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5. Describe any personal, family, school, or social factors that you believe should be considered as a part of your application (if applicable):

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5. Attach a brief essay (500 words or less) describing the importance of mental health and how this relates to your chosen career path. Essays should be double-spaced and typed in size 12 font.

6. A creative submission piece is required for the 2024 application, such as a poem, a visual art piece, video, etc. We ask that applicants do not appear in any video, photograph, etc. to ensure anonymity for the voting members of the MHA Scholarship Committee. Pieces can be submitted with the application, or they can be emailed to MHA at andrea@mhalakeshore.org

After all components of the application are complete, please remember to sign your application below.

*I confirm that the information provided in this application and essay is true and complete.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Applicant signature) (Date)