Magill/ McCutchan Health Services Scholarship

This scholarship is a memorial to Sheri Magill R.N. a school nurse who lost her battle to cancer in 2013. Also, honoring Sally McCutchan R.N. for her over 44 years of continued service and dedication to the students and faculty of APISD.

The purpose of the Magill / McCutchan Scholarship will be to make available a Health Field scholarship to a qualified applicant to be used to further their Health Field education beyond high school.

Qualifications:

- 1. Be a Senior at Aransas Pass High School.
- 2. Enroll in an accredited Health Field Educational program beyond the high school level in the fall and spring semesters immediately following high school graduation.
- 3. Turn the signed enclosed letter of intent in by Aug. 9, 2024
- 4. Have demonstrated high moral character.
- 5. Must have maintained a high school record that indicates probable success in the education program selected.
- 6. Must have received two recommendation letters from others. One from an educator.
- 7. Application must be on the Magill / McCutchan Scholarship Form only.
- 8. Must submit a one page typed Resume about yourself.

Disbursements of Funds for Fall Semester:

The recipient of the scholarship will receive one-half of the monies for the 2024 fall semester upon:

- Receipt of your enclosed letter of intent by Aug. 9, 2024.
- Receipt of enrollment receipt from Educational Program by August 9, 2024.

No Scholarship monies will be disbursed after August 12, 2024.

Disbursements of 2nd half of Funds for Spring Semester:

A 2.5 GPA must be maintained for the Fall Semester.

• A copy of the Fall semester grades and receipt of enrollment for spring semester must be submitted by January 3, 2025 in order to be eligible to receive the second half of the monies.

No Scholarship monies will be disbursed after January 6, 2025.

If Deadlines are not met, the scholarship will be forfeited..

You may send your required document to PO Box 236, Aransas Pass, Tx 78335 or scan and email your required documents to sgmccutchan@gmail.com

Magill / McCutchan Health Services Scholarship Application

All lines on application must be completed in order to be reviewed by the scholarship committee even if you have to put N/A in the blank. Date Due: April 9, 2024

Photo Required:

1			
Last Name	First	Middle	
2. Place of Birth	Da	te of Birth	
3. Home Address			
A. Home Phone	(Cell Phone	
4. Father's name		Mother's nam e	
 A. Do you live with □ Fathe B. Any siblings in college □ C. Father's Occupation D. Mother's Occupation 	Yes ⊡No If ye	es, how many?	
5. Applicant's e-mail address:			
6. Are you graduating from Aransas Pass High School?			
7. Rank in Class 0	Grade Point Average		
8. Number of Excused Absend	ces Number of	f Total Absences	
9. Years at Aransas Pass ISD	□9 th □10 th □11	th $\Box 12^{th}$ (Check all that apply)	
10. Which College do you plan	to attend?		
11. What course of study do you plan to enroll in?			
12. Have you been accepted to letter of acceptance.	the college of your ch	ioice? If yes, include you	ur
13. Have you applied for financ	ial aid?	Did you qualify?	

Complete back of Application

Magill / McCutchan Heath Services Scholarship Application

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Date Due: April 9, 2024

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14. Please List any sources of financial aid available to you (i.e. other scholarships, grants, loans?)

15. Expected Family Contributions (if known)

16. List Extracurricular Activities you have participated in High School.

17. List Job History

18. List School and Community Volunteer History

19. Additional Comments:

Magill / McCutchan Health Services Scholarship Letter of Intent

2024 Fall Semester Letter of Intent

has been named as the recipient of this scholarship. As stated in the terms of the scholarship, the above stated recipient must sign and return this Letter of Intent to the Chairperson of the Scholarship Committee by August 9, 2024.

Magill / McCutchan Scholarship Co-Chairmen Chairman Sally McCutchan RN P.O. Box 236 Aransas Pass, Tx 89335 <u>sgmccutchan@gmail.com</u> 361-776-2739 Scholarship Recipient

Date