

WILLIAMS FAMILY FOUNDATION SCHOLARSHIP GUIDELINES
EFFECTIVE JANUARY 2008

1. Scholarship applications or requests for renewals must state the student's plans to enter into a patient care profession or occupation, such as physician, dentist, RN, lab tech, OT/PT/ST/RT, physician's assistant, radiological technician, dental hygienist, pharmacist and almost any other direct medical treatment field.
2. The foundation will not entertain undergraduate psychology majors, but will consider postgraduate clinical psychologist's programs.
3. Undergraduate majors in any type of engineering potentially leading to medical research, or majors leading to medical administration are not acceptable since these are not direct medical treatment fields. The Foundation will consider undergraduate students in chemistry and other declared majors wherein the student has declared that the object is medical school admission.
4. **MINIMUM GRADE POINT REQUIREMENT FOR RENEWAL**

| <u>YEAR</u> | <u>CUMULATIVE AVERAGE REQUIRED</u> |
|-------------|------------------------------------|
| First Year | 2.6 |
| Second Year | 2.8 |
| Third Year | 3.0 |
| Fourth Year | 3.0 |

Should a student's cumulative grade point average fall below the minimum, the student's scholarship may be terminated until the cumulative average meets scholarship requirements.

5. For students who have maintained the requisite grade point average and have failed to be admitted to professional schools, such as PT/OT or nursing, the Board will allow the student to remain on scholarship for a second attempt at being admitted to the professional school. In other words, the Board will extend the scholarship, providing grade requirements have been met, for one additional year in order that the student may attempt to be admitted a second time.
6. All students desiring renewal of their Williams Scholarship must apply in writing to the high school by March 15 of each year. The renewal request should include a personal letter outlining the student's major, career goals, transcript of grades since last application and cumulative grade point average. And include any other pertinent information which may be helpful in determining the renewal of the scholarship.
7. All scholarships may only be used for Colorado institutions, as no scholarships will be granted for out of state use.
8. Each high school shall supply to the Foundation copies of all original applications and all renewal requests and grade transcripts.

WILLIAMS FAMILY FOUNDATION SCHOLARSHIP APPLICATION
Initiated at Brush High School in 1969

CRITERIA: You must be entering training for a direct medical treatment field, be enrolled in a Colorado college, have good character and citizenship, and have shown high academic achievement in high school. Recipients are eligible for renewal each year if the required college grade point average is maintained. The foundation reserves the right to terminate the scholarship.

PLEASE TYPE:

I, _____, a graduating senior at Brush High School, wish to be considered as an applicant for the Williams Scholarship. I plan to attend _____ (name of college) next fall, where I will major in _____.

I hope to become a _____ (medical career) upon completion of my education.

My cumulative high school grade point average is _____.

I rank _____ in a class of _____.

The following should be attached to this application and returned to the Brush High School Counseling Office. Please make sure they are signed and dated.

1. A personal letter stating:
 - a. how you decided on a medical career.
 - b. any background or relevant work experience you have had.
 - c. your plans for further education and how they relate to a medical treatment field.
 - d. what goals and timelines you are setting for yourself in order to enter a medical field.
2. Your current high school transcript should be attached.

Submit this form with your letter to your school counselor by **February 15.**

Signature of Applicant: _____

Date: _____

WILLIAMS FAMILY FOUNDATION SCHOLARSHIP APPLICATION
For Former Graduates of Brush High School
Initiated in 1988

CRITERIA: You must be entering training for a direct medical treatment field, be enrolled in a Colorado college, have good character and citizenship, and have shown high academic achievement in high school or college. Recipients are eligible for renewal each year if the required college grade point average is maintained. The foundation reserves the right to terminate the scholarship.

PLEASE TYPE:

I, _____, A GRADUATE OF BRUSH

HIGH SCHOOL in the year _____, wish to be considered as an applicant

for the Williams Family Scholarship. I plan to attend _____

_____ (name of school) where I will major in

_____. I plan to become a

_____ (name of medical career).

The following letters need to be returned to the Brush High School Counseling Office. Please make sure they are signed and dated.

1. One letter from a person who is not related to the applicant. The person should be a teacher, instructor or direct supervisor who can attest to your academic aptitude and achievement.
2. A personal letter stating:
 - a. why you have decided on a medical career at this time.
 - b. any background or relevant work experience you have had.
 - c. your plans for further education and how they relate to a medical treatment field.
 - d. what goals and timelines you are setting for yourself in order to enter a medical field.
3. Your most recent high school or college transcript.

Submit this form with your letters and transcript by **March 15** to:

Brush High School Counseling Office

P.O. Box 585

Brush, Colorado 80723

Signature of Applicant: _____

Date: _____