



2021 Scholarship Application

Scholarships are meant to assist high school students who intend to pursue a career in healthcare, but are in need of financial support to attend the Weekend Medical Academy. **Specifically, students from local health career pathway programs (from San Diego County)*** with their financial need demonstrated in the required essay below. Please understand that our funds are **very limited**, and we may not award full scholarships. Applications will be reviewed and selected by Rady Children’s staff and awards will be communicated by January 5, 2021. If awarded, scholarship funds will be credited toward program tuition costs and not given directly to the student.

Part I: Student Information (completed by Student)

Full Name:	(First)	(Last)
Date of Birth:		Grade:
High School:		

Part II: Background Information (completed by Student and Parent/Guardian)

1. What amount of the full tuition (\$300) would you need as a scholarship award to be able to attend?
\$ _____
2. If a scholarship is not awarded to you, would you still be able to attend academy? Yes ___ No ___

Part III: Short Answer

1. In 200 words, please describe your motivation for participating in the Rady Children’s Weekend Medical Academy-Mental and Behavioral Health. Why do you want to attend and what do you expect to gain from it? Please explain your financial need.

Part IV: Statement of Accuracy

I hereby affirm that all the above stated information provided is true and correct to the best of my knowledge. I understand that my application is not complete without BOTH my signature and my parent/guardian’s signature (if under the age of 18). I am not signing for my parent/guardian.

Signature of Scholarship Applicant:	Date:
Signature of Parent/Guardian: <small>*if under the age of 18*</small>	Date