

CRMC Past President's Scholarship

Funded by the Cheyenne Regional Medical Center Volunteers

SCHOLARSHIP REQUIREMENTS: Full time student pursuing a career in a health related profession. You must have been admitted to an Allied Science program to be eligible. For Wyoming residents enrolled on the Cheyenne campus. Students must maintain a cumulative GPA of 2.5.

Please fill in the following information and submit to the Scholarship and Financial Aid Office with a copy of your most current transcripts. Deadline to apply is **June 1 by 5 p.m.**

Name	
Address Street City, State, ZIP	
EDUCATION	
High School	<input type="checkbox"/> Diploma <input type="checkbox"/> GED
Address Street City, State, ZIP	
Declared Major	College GPA
Enrollment status: <input type="checkbox"/> full-time <input type="checkbox"/> part-time	Hours enrolled
Expected graduation date	
ALLIED SCIENCE PROGRAM OF STUDY Please check the program you have been admitted to.	
Echocardiography, AAS <input type="checkbox"/>	Radiography, AAS <input type="checkbox"/>
Echocardiography, CERT <input type="checkbox"/>	Respiratory Therapy, AAS <input type="checkbox"/>
Nursing, ADN <input type="checkbox"/>	Sonography, AAS <input type="checkbox"/>
Physical Therapist Assistant, AAS <input type="checkbox"/>	Surgical Technology, AAS <input type="checkbox"/>
CURRENT SOURCES OF FINANCIAL AID	
Scholarships	Amount
Grants	Amount
Work Study	Amount
Other	Amount

PAST EMPLOYMENT

Please list most recent employer first.

Employer		Dates of Employment
Address Street City, State, ZIP	Job Duties	
Employer		Dates of Employment
Address Street City, State, ZIP	Job Duties	
Employer		Dates of Employment
Address Street City, State, ZIP	Job Duties	

ACHIEVEMENTS

Please list any achievements, personal and/or scholastic including any school or community organizations in which you are active:

Why have you chosen a health care career?

What are your career plans following graduation?

☐ By checking this box, I hereby certify the provided information is accurate to the best of my knowledge. I also certify that I will allow the Scholarship and Financial Aid Office at LCCC to release any information that is applicable to this application.

Date

Submission Instructions

Submit application before **June 1**.

Please note the pop-up window that appears after you click Submit.

1. The window will ask you to select your email client.
2. If you use Microsoft Outlook Express, Microsoft Outlook, Eudora or Mail, click "OK" in the pop-up window. The form will be emailed to us.
3. If you use any other client, such as Yahoo or Hotmail, choose "Internet Email," then click "OK."
 - The computer will save the form to your hard drive.
 - Open your email account.
 - Attach the form to a message and email it to FinancialAid@lccc.wy.edu.
4. Please contact Financial Aid at 307.778.1156 to make sure the form was received successfully.

SUBMIT

or

PRINT

and mail to: Laramie County Community College
Scholarship & Financial Aid Office
1400 E. College Drive
Cheyenne, WY 82007