The St. Mary’s School of Nursing / Mountwest Community and Technical College Minority Scholarship is to be awarded to a graduating high school student who meets the following criteria:

1. Must be Black/African-American, Hispanic, Native American, Asian, Native Hawaiian, or Pacific Islander.
2. Must be a resident of one of the following West Virginia counties: Cabell, Lincoln, Mason, Putnam, or Wayne.
3. Must have a 3.0 cumulative grade point average in high school and must be graduating from high school in May/June of the application year.

Additional requirements:
**Must complete and submit the following:**

- Completed scholarship application
- High school transcript or a letter printed on school letterhead verifying a minimum 3.0 grade point average.
- An 800-word typed essay answering the question, “How has being a minority/person of color molded you as a person and how will that shape your career as a registered nurse?”

**The recipient of this scholarship will receive the following:**

- Waived tuition at Mountwest CTC for support courses required for St. Mary’s School of Nursing (Approximately $5,000).
- Full tuition, fees, and books for all courses at St. Mary’s School of Nursing upon completion of prerequisite and corequisite courses at Mountwest CTC (Approximately $19,000.00).

Student must remain continuously enrolled and maintain an overall 2.5 GPA for ongoing eligibility.

**DEADLINE TO SUBMIT APPLICATION IS APRIL 28, 2023.**
St. Mary’s School of Nursing / Mountwest CTC Minority/Person of Color Scholarship

This application is to apply for the St. Mary’s School of Nursing / Mountwest CTC Minority/Person of Color Scholarship.

**MUST BE TYPED AND NEATLY ORGANIZED.**
The completed application can be submitted via US Mail, Email, or Hand Delivery to:

- **US Mail:** Dr. Joey Trader, St. Mary’s Medical Center, 2900 1st Avenue, Huntington, WV 25702
- **Email:** jtrader@st-marys.org
- **Hand Delivery:** St. Mary’s School of Nursing, 2853 5th Avenue, Huntington, WV 25702

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<thead>
<tr>
<th>Name:</th>
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<tbody>
<tr>
<td>Address:</td>
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<tr>
<td>(Street number, City, State, Zip)</td>
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<tr>
<td>Telephone number:</td>
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<td>Projected graduation date:</td>
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<td>(Month/Year)</td>
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<td>High School:</td>
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<td>West Virginia County of Residence:</td>
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<td>Grade point average:</td>
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By signing and dating below, I represent that I meet the eligibility criteria and will provide any supporting documentation upon request.

_________________________  
Student Signature  
_________________________  
Date
date

gstudent
gdate

_________________________  
Scholarship Committee Member Signature  
_________________________  
Date Completed Application Received and Confirmed Complete