

APPLICATION FORM: Instructions
Trudy McAlister Foundation – AOM Scholarship Fund

The AOM Scholarship Fund [a division of the **Trudy McAlister Scholarship Foundation**] is a merit-based scholarship fund for students of Acupuncture and Oriental Medicine in ACAOM accredited schools.

Deadline - Completed applications and documents must be postmarked by **January 15, 2017**.

Eligibility

- Completed at least one full academic year of their professional training.
- Each college can nominate up to three students.
- Applicants must be United States citizens.
- A minimum 3.1 GPA from Undergraduate college work and AOM college grades is recommended, although all applications that qualify in other requirements will be reviewed. Transcripts that show Pass/Fail results will also be reviewed.

Application Procedures

- Complete the Trudy McAlister Scholarship application. **ONLY APPLICATIONS RECEIVED IN HARD COPY WILL BE CONSIDERED.**
- Include the required two essays. Please write about both and keep each essay to under 500 words.
- Enclose with the completed Scholarship Application, two letters of recommendation along with completed Recommendation Form (for each) from a college faculty member. Recommenders must seal and sign the envelope making sure that the applicant's name appears on the front of the envelope.
- Include an official copy of your transcript(s) – include **all** college transcripts, both undergraduate **and** graduate. Copies of official undergraduate transcripts may be the AOM College.
- Include a professional photo of yourself. Finalists will be asked to submit an electronic copy in .jpg format. (An article will be written for *Acupuncture Today*, and recipients names and photos will be included in the article.) And email us a good resolution digital copy. Please have the photo **be of professional quality**.

• Please note:

- **NO incomplete applications will be considered.**
- **Only nominations channeled through school officials will be considered.**
- **All applications and letters must be sent by the college.**
- **If a college submits more than 3 applications, NONE will be accepted.**
- **Applications postmarked after the deadline will not be accepted.**

Notification:

The successful applicants will be announced in the spring of 2017.

Schools need to return completed application(s) to:

1. **AOM Scholarship Fund**
c/o Trudy McAlister Foundation
PO Box 549
Canby, OR 97013
2. Any questions about the scholarship and/or the application process, please contact:
Heather George, Executive Director. Email: Heather@AOMScholarship.org
Phone: 970-209-6723

Trudy McAlister Scholarship Application

(for student applicants to complete)

Instructions: Please fill out this application neatly (preferably typed). If you need extra room, you may attach a separate sheet of paper. You may also attach a résumé or Curriculum Vitae. Return the application with the supporting materials to the address listed below.

Name: _____
 Last First Middle

Permanent address: _____

City: _____ State: _____ Zip: _____

Permanent phone: (____) _____

Local address: _____

City: _____ State: _____ Zip: _____

Local phone: (____) _____ Cell phone: (____) _____

Email: _____

Are you a United States citizen or permanent resident? Check one: Yes No

Name and location of high school from which you graduated:

_____ Public Private

What is your sex/gender? Check one: Male Female Other

Other college from which you graduated:

_____ Any degrees obtained: _____ Cumulative GPA _____

Current college of AOM: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Contact at college: _____ Phone: (____) _____

Previous college of AOM (if any): _____

Name of contact at college: _____ Contact's phone:(____) _____

Student ID#: _____

Units completed: _____ Expected graduation date: _____

Participation in the college's student association: Y N

Participation in a national student association: Y N

Extracurricular and community activities:

[Please attach an additional page explaining your Extracurricular and Community activities.]

Career goals: [Please attach an additional page explaining your career goals.]

Essay Questions: ATTACH AS SEPARATE PAGES. NOT TO EXCEED 500 WORDS per essay.

Question 1: Why do you want to practice AOM?

Question 2: What is one specific experience either you have had or witnessed where AOM was key in making a significant difference in your/their health? Please share this story while respecting the privacy of others (omit names and other identifying information).

Trudy McAlister Scholarship Recommendation Form
(for faculty/other recommenders to complete)

Applicant's Name: _____

Student's College ID Number: _____

To the applicant : Please give this form to your recommender who can comment on your qualifications for this scholarship. For the convenience of the person who makes the recommendation, you should include an envelope addressed to: **AOM Scholarship Fund, c/o Trudy McAlister Foundation, PO Box 549, Canby, OR, 97013**

Recommenders may mail Scholarship Recommendation Form and/or letter of recommendation separately; however, the Scholarship Committee strongly encourages applicants to submit all requisite application materials together at the same time.

Under the Federal Family Educational Rights and Privacy Act of 1974, students are entitled to review their records, including letters of recommendation; however, those who write and assess recommendations may attach more significance to those documents if they know their comments will remain confidential. You may choose the option to waive your right to access these recommendations. Please check the appropriate statement to indicate your choice, and then sign your name below.

I waive my right to review this recommendation.

I do not waive my right to review this recommendation.

Date: _____ Applicant's Signature: _____

RECOMMENDATION
(Please Print)

Name of Recommender, Faculty, or Other:

Title: _____ Institution/School: _____

Address: _____

City, State, Zip: _____

Phone number: (____) _____ Email: _____

1. I have known the applicant for _____ year(s) and _____ months.

2. I know the applicant: ___ very well ___ fairly well ___ slightly

3. I know the applicant in the following capacity:

Please rate the applicant on the following with **5 being high and 1 being low**:

	5	4	3	2	1
Oral communication skills	___	___	___	___	___
Leadership ability	___	___	___	___	___
Academic ability	___	___	___	___	___
Written communication skills	___	___	___	___	___
Takes initiative	___	___	___	___	___

4. Indicate the strength of your overall endorsement of the applicant:
___ Highly recommend ___ Recommend ___ Recommend with some reservation

5. Please add additional information, which you believe is pertinent to the possible selection of this applicant receiving a Trudy McAlister Scholarship. Please feel free to attach additional sheet(s) or a letter.

Recommender's signature

Date

PLEASE NOTE: Recommenders may mail the completed Recommendation Form and/or letter of recommendation separately; however, the Review Committee strongly encourages recommenders to enclose candidate's letter in a sealed, signed envelope with the student's name written on the front so that s/he may submit all requisite application materials together at the same time.

Thank you for completing this recommendation. If you choose to send this form separately, please mail the document to:

AOM Scholarship Fund
c/o Trudy McAlister Scholarship
PO Box 549
Canby, OR 97013

RECEIVED:

DEADLINE:
Applications must be postmarked by January 15, 2017

Recommendations not postmarked by this date will render student's application incomplete.

POSTMARK: _____