

SIEMENS HEALTHCARE DIAGNOSTICS 2009-2010 LEGACY SCHOLARSHIPS



You could receive one of the \$2,000 scholarships sponsored by Siemens Healthcare Diagnostics if you are enrolled in your final clinical year of education in a Medical Technologist (MT), Clinical Laboratory Scientist (CLS), Medical Laboratory Scientist (MLS), Medical Laboratory Technician (MLT), or Clinical Laboratory Technician (CLT) program, and are the child, grandchild, or sibling of a certified MT/CLS/MLS or MLT/CLT.

Eligibility Requirements

To be eligible for a scholarship, you must:

- Be enrolled in a NAACLS accredited program AND be in the final clinical year of education for an MT/CLS/MLS program or MLT/CLT program by the application close date
- Be the child, grandchild, or sibling of a certified MT/CLS/MLS or MLT/CLT
- Have a minimum GPA of 2.8 out of 4.0
- Be a United States citizen OR a permanent United States resident
- Submit a complete application packet

Selection Criteria

- Academic achievement (cumulative GPA)
- Professional goals
- Leadership abilities
- Community activities

A. Applicant Information (type or print clearly)

Applicant's name _____

Address _____

City _____ State _____ Zip _____

Daytime telephone _____

E-mail address _____

Are you related to any employees, board members, or officers of Siemens?

Yes No

If Yes, list name(s) and relationship(s) _____

Course of study: (check one)

MT/CLS/MLS MLT/CLT

Legacy relationship. Check all that apply.

Parent Grandparent Brother/Sister

Name of family member _____

Certifying agency _____ Certification number _____

Application Instructions

1. You may photocopy this application form.
2. Please type or print neatly.
3. You must complete the entire application.
4. **Enclose official school transcripts**
 - You may fulfill the requirement for the submission of official transcripts by enclosing copies of official transcripts that have been verified (signed and dated) by your program director or by enclosing official transcripts from each institution attended.
 - If you have less than 30 semester hours of college credit, you must also send a high school transcript.
 - In lieu of a transcript from a foreign country, submit an approved evaluation from an agency accepted by the ASCP Board of Registry.
5. **Enclose three letters of recommendation** from individuals who are not members of your immediate family. The letters should be from faculty members, program directors or other persons who can address such areas as your academic achievement, leadership in school and community activities, and potential for success in the profession.

6. Enclose an essay (500 words or less) telling us about:

- The role your family played in your laboratory career choice
 - Why you chose the profession
7. List your leadership and community activities in the last 3 years, and any awards or honors that you have received, in a resume format with a description of your involvement.
 8. Enclose the completed application and all supporting documents in a single envelope. You will be notified by email when all of your application materials are received.
 9. Please include a self-addressed stamped legal-sized envelope for notification of the scholarship selection decision.
 10. Applications may be submitted beginning August 1, 2009. **All applications must be postmarked no later than November 11, 2009. Mail to:**
ASCP, Siemens Healthcare Diagnostics Legacy Student Scholarship Program, 33 West Monroe, Suite 1600, Chicago, IL 60603.
 11. Recipients of the Siemens Healthcare Diagnostics Legacy Student Scholarship are notified by mail no later than February 2010. The scholarship checks are mailed during March 2010.

All information provided is confidential and is used only to select scholarship recipients. However, winners are asked to release their names, city and state for use in Siemens publications and scholarship announcements. The decision of the selection committee is final.

B. List previous and current education, including all schools attended, in the chart below. You should include high school if less than 30 semester hours of college credit have been earned.

*Please note: Calculated grade point average is mandatory. If more than 4 schools attended list on separate page.

School / Institution	Dates attended	Type of degree, diploma or certificate awarded (if any)	Completed hours		Grade point average*	Transcript
			Semester hours	Quarter hours		
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

C. Program Information

Name of NAACLS accredited institution _____
 Program Director _____
 Address _____
 City _____
 State _____ Zip code _____
 Telephone () _____
 Fax () _____
 Email _____

D. Applicant Declaration and Verification

The application will not be reviewed without the proper signatures.

Applicant's Declaration

I am a United States citizen or a permanent resident and certify that the information given in this application is true to the best of my knowledge. I also understand that no materials submitted as part of the application can be returned.

Signature of applicant _____
 Date _____

Verification by Program Official

I certify that the applicant is currently enrolled in a NAACLS accredited program, in his/her final clinical year of MT/CLS/MLS education or final year of MLT/CLT education, and in good academic standing.

Month and year that applicant will complete program _____
 Signature of program official _____
 Date _____
 Title _____
 Name of program _____

Please check all scholarship applications submitted in 2009:

- Siemens Healthcare Diagnostics MT/CLS/MLS or MLT/CLT
- Siemens Healthcare Diagnostics Legacy
- Siemens Healthcare Diagnostics Graduate
- ASCP Scholarship

E. Print your cumulative grade point average here:

Use the formulas below to determine your cumulative GPA.

Semester Hours (SH) Calculation Formula

SH per School x GPA = Quality Points (QP) per school
 QP per School One + QP per School Two = Total QP
 SH per School One + SH per School Two = Total SH
 Total QP ÷ Total SH = Cumulative GPA

* Example: If a student attended College One for 60 SH and earned a GPA of 3.50 and transferred to College Two for 90 SH with a 4.0 GPA, the student's cumulative grade point totals 3.80 as follows:

60 SH x 3.50 GPA = 210 QP
 90 SH x 4.0 GPA = 360 QP
 210 QP + 360 QP = 570 Total QP
 60 SH + 90 SH = 150 Total SH
 570 Total QP ÷ 150 total SH = 3.80 cumulative GPA

Quarter Hours (QH) Calculation Formula

Convert QH to SH by dividing by 1.5, and use the SH calculation formula.

F. Mailing Instructions

Incomplete application packets will not be returned and are not reviewed. **STOP AND DOUBLE CHECK!** Did you enclose the following items in ONE envelope?

- Signed Application with calculated GPA
- Official transcript(s) from each school(s) attended
- Three letters of recommendation
- Essay and activities list
- One self-addressed, stamped legal-sized return envelope

NOTE: The Legacy Scholarship is only offered to students who are children, grandchildren or a sibling of a certified MT/CLS/MLS or MLT/CLT.

The postmark deadline is November 11, 2009

Mail to:

ASCP
 Siemens Healthcare Diagnostics Legacy Scholarship Program
 33 West Monroe, Suite 1600
 Chicago, IL 60603

