

## **DR. SALEEM A. SHAH MEMORIAL**

Scholarship for Healthcare/Medical Major

In the amount of \$1,000.00

*Sponsored by Catherine's Cause*

**Application Guidelines:** \$1,000.00 Scholarship is for any High School Student from any Carroll County High School who plans to study Mental Health, Nursing, Pre-Medicine, or a related healthcare field.

1. Original application must be fully completed.
  2. Closing date of application is postmarked no later than April 19 of the current year.
  3. Mail Application to the **Dr. Saleem Shah Memorial Scholarship**  
**3032 Crown Circle, Manchester, MD 21102, Attention: Clare Fisher**
  4. Copies of a sealed official high school transcript and college acceptance letter required.
  5. Two (2) letters of reference from one (1) teacher and one (1) non-family member.
  6. Parent/ Legal guardian signatures are mandatory for eligibility.
  7. Please type or print legibly. Attach any or all additional sheets.
- Applicant must have earned a GPA of 3.0 at time of application.

### **Student Information:**

Full Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ Birth Date \_\_\_\_\_

\_\_\_\_\_

### **Family Information:**

\_\_\_\_\_  
Father/Stepfather/ Guardian

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Mother/Stepmother / Guardian

\_\_\_\_\_  
Occupation

**Admission Information:**

What college or University do you plan to study in the Field of Mental Health, Nursing, Pre-Medical or a related healthcare field?

1<sup>st</sup> Choice \_\_\_\_\_ Have you Applied? \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_ Have you Applied? \_\_\_\_\_

Have you been accepted to any College or University? \_\_\_\_\_

Do you have a Job? Y / N If Yes, Where do you work? \_\_\_\_\_

How many hour in an average week do you work? \_\_\_\_\_

What extracurricular activities have you been involved with during High School?

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List all certificates, awards and /or honors you have received during High School? *(Use a separate sheet if not enough space).*

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**Scholarship Essay Questions:** (Please answer on a separate sheet, paragraph form, typewritten).

1. Why are you pursuing a career in the Mental Health field?
2. What is your primary area of interest and your secondary area of interest?
3. Explain what your future plans will be once you have completed your education in the Medical Field of studies.
4. Who is the most Influential Person in your life? State how that individual impacted your life in a positive way.

**Criteria:**

- A. Student must maintain a full-time enrollment status (12 or more credit hours) during the fall semester that the scholarship award has been designated.
- B. The Scholarship is based on Academic Achievement, Community Service and Extracurricular Activities.

**Certificate of Authorization:**

I certify that all of the information in this application is true and complete to the best of my knowledge. I hereby any information on this application to be verified for accuracy.

*Signatures:*

Student: \_\_\_\_\_ Date \_\_\_\_\_

Father/ Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Mother / Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Checklist:**

- A.** Copies of ACT/ SAT Scores
- B.** Official High School Transcript
- C.** Two (2) Letters of Recommendation
- D.** Essay Responses
- E.** Copy of college acceptance letter (If available)
- F.** Copies of Awards, Honor, etc.
- G.** Any other Documentation that you feel would be helpful

The Dr. Saleem A. Shah Memorial Scholarship is sponsored by Catherine's Cause, a Carroll County Community Foundation Fund. Dr. Shah a leading Psychologist with the National Institute of Health was hit head on in November of 1992 by a Drunk Driver on his way home. He left a family with a wife, six daughters and eight grandchildren at that time. Dr. Shah's daughters regularly volunteer with Catherine's Cause and are strong advocates on working to alert the public on the dangers of Drinking and Driving. To honor Dr. Shah's memory the family along with Catherine's Cause are offering this Scholarship in the field of Mental Health in his honor.