**Nicholson Scholarship Application**

**February 2021**

**Office of Student Services & Enrollment Management**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dental Class of \_\_\_\_\_\_\_\_\_\_

Do you have a close relation who is a dentist? Yes No

If so, how is this person related to you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please initial to verify that you meet the following criteria:

\_\_\_\_\_\_ U.S. citizen

\_\_\_\_\_\_ Graduate of a Michigan high school

\_\_\_\_\_\_ Have lived in Michigan for at least 10 years

\_\_\_\_\_\_ Have financial need and/or educational debt

I certify that the above information is correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**Please submit this application along with a personal statement and CV to Adrianna Moreno via email or in hard copy by March 24, 2021 at 9:00am. Successful candidates will proceed to an interview process in April. Seven students will be selected this year.**