Gene & Marilyn Nuziard Healthcare Scholarship & Loan Fund
Application Process

Applicants are required to submit:

1. A Gene & Marilyn Nuziard Scholarship & Loan Fund Application
2. A one page typed personal statement addressing the following:
   - Achievements
   - Academic Potential
   - Career Goals
   - Community and/or school involvement
3. Scholarship and Student Loan Applicants are required to submit two “Evaluator Forms” with letters of recommendation attached. One letter must be from a teacher or professor. Loan forgiveness and repayment applicants are required to submit two “Evaluator Forms” with letters of recommendation attached. One letter must be from a supervisor. The second letter of recommendation may be from any of the following: teacher, professor, guidance counselor, community leader, church leader, and/or immediate supervisor.

   The individual (evaluator) should comment on your scholastic achievements and personal strengths such as enrollment, academic abilities and potential, maturity, motivation, self-confidence, leadership, perseverance, extra curricular activities, and community involvement.
4. FAFSA
5. Official Transcripts
6. Curriculum Vitae
7. Most recent federal income tax return form 1040 or 1040EZ

Application Deadline: All materials must be delivered by May 1st to:
QueensCare
Gene & Marilyn Nuziard Scholarship Fund
950 S. Grand Avenue, 2nd Floor South
Los Angeles, CA 90015

Note: It is the responsibility of the applicant to verify the completeness of his/her application and submit it to QueensCare by the deadline. Incomplete applications will not be included in the pool for consideration. Drop-offs will not be accepted.

Notification: Applicants will be notified by mail.

Information: If you have any questions or need assistance with the application process, please contact QueensCare at (323) 669-4301.
SECTION A: To be completed by the applicant

Name: ___________________________ ___________________________ ___________________________
Last First Middle

Address: ___________________________ ___________________________ Phone: ___________________
City, State, Zip

SECTION B: To be completed by the evaluator

Name of Evaluator: ___________________________ Title: ___________________________

Relationship to the applicant: ___________________________ Length of Acquaintance: ___________________________

In comparison to others, I would rate this candidate as:

<table>
<thead>
<tr>
<th></th>
<th>Exceptional</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>No Basis for Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Expression</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Maturity</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Motivation</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Self-Confidence</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Leadership</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Commitment</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

I would recommend this candidate:

<table>
<thead>
<tr>
<th></th>
<th>Enthusiastically</th>
<th>Strongly</th>
<th>Fairly Strong</th>
<th>With Reservation</th>
<th>Not Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Potential</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Character &amp; Personal Promise</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Signature: ___________________________ Date: ___________________________

To the evaluator:

On official letterhead, please provide the Scholarship Committee with your brief assessment (one page typed) of the candidate. Of particular interest to the committee are:

- The candidate’s ability to succeed academically or professionally.
- The candidate’s ability to overcome obstacles.
- The candidate’s interests, work/study habits, achievements, and future goals.

Please attach your letter recommendation to this Evaluation Form and mail to:

QueensCare
Gene & Marilyn Nuziard Scholarship & Loan Fund
950 S. Grand Avenue, 2nd Floor South
Los Angeles, CA 90015

Faxed applications are acceptable: (323) 953.6244

To the student: Please provide to your evaluator a stamped, addressed envelope for the Evaluation Form.

Evaluator form 1-08
SECTION A: To be completed by the applicant

Name: 

Address: 

SECTION B: To be completed by the evaluator

Name of Evaluator: 
Title: 

Relationship to the applicant: 
Length of Acquaintance: 

In comparison to others, I would rate this candidate as:

<table>
<thead>
<tr>
<th></th>
<th>Exceptional</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>No Basis for Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Expression</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maturity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motivation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Confidence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leadership</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commitment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I would recommend this candidate:

<table>
<thead>
<tr>
<th></th>
<th>Enthusiastically</th>
<th>Strongly</th>
<th>Fairly Strong</th>
<th>With Reservation</th>
<th>Not Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Potential</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Character &amp; Personal Promise</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature: ____________________________ Date: ____________________________

To the evaluator:

On official letterhead, please provide the Scholarship Committee with your brief assessment (one page typed) of the candidate. Of particular interest to the committee are:

- The candidate’s ability to succeed academically or professionally.
- The candidate’s ability to overcome obstacles.
- The candidate’s interests, work/study habits, achievements, and future goals.

Please attach your letter recommendation to this Evaluation Form and mail to:

QueensCare
Gene & Marilyn Nuziard Scholarship & Loan Fund
950 S. Grand Avenue, 2nd Floor South
Los Angeles, CA 90015

Faxed applications are acceptable: (323) 953.6244

To the student: Please provide to your evaluator a stamped, addressed envelope for the Evaluation Form.