



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.

QueensCare - Gene & Marilyn Nuziard Scholarship & Loan Fund

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:

	Exceptional	Above Average	Average	Below Average	No Basis for Comparison
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I would recommend this candidate:

	Enthusiastically	Strongly	Fairly Strong	With Reservation	Not Recommended
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character & Personal Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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.

QueensCare - Gene & Marilyn Nuziard Scholarship & Loan Fund

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Last First Middle

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