



THE PARTNERSHIP
FOR ARTS IN MEDICINE
Finding balance through creativity

Healing Arts Certificate Program Community Member Scholarship

Please type. Hand-written applications will not be accepted.
Application may be sent via email (Subject: SCHOLARSHIP APPLICATION) to:
Melissa Sandoval, Program Coordinator mwsandov@unm.edu

Healing Arts Course Name _____ Semester, Year _____

1. Name _____, _____ M.I.
Last First

Permanent mailing address

Number and street

City

State

Zip

E-mail

Phone _____

Birth date _____

Month

Day

Year

2. High school diploma only: High School GPA _____

3. College GPA (current): Undergraduate GPA _____ Graduate GPA _____

College or Univ. attended

Name of College or University

Dates Attended

Degree Earned

Major

Minor/Concentration

Name of College or University

Dates Attended

Degree Earned

Major

Minor/Concentration

4. Scholarship awards will differ from semester to semester but range from \$225 to \$450.

5. Write a brief essay (approximately 200-400 words) stating why this course would be meaningful for you at this time in your life.

I certify that all information I have provided on this form is true and complete to the best of my knowledge.
I agree to give proof of the information on this application if requested.

Signature _____

Date _____