**Diversity Scholarship**

A BlueCross BlueShield of Tennessee Community Trust scholarship for promising and diverse students administered by the Memphis Chapter of the National Association of Health Services Executives (NAHSE).

**About BlueCross**

BlueCross BlueShield of Tennessee's mission is to provide its customers and communities with peace of mind through better health. Founded in 1945, the Chattanooga-based company is focused on reinventing the health plan for its 3 million members in Tennessee and across the country.

**About NAHSE**

NAHSE’s purpose is to ensure greater participation of minority groups in the health field. Its basic service is to develop and maintain a strong viable national body to more effectively have input in the national health care delivery system.

In 2016, BlueCross BlueShield of Tennessee in collaboration with the NAHSE Memphis Chapter plans to award three (3) recipients in recognition for their outstanding achievements in community service, leadership, and academics. These scholarships are given to undergraduate students who wish to pursue careers in the field of health care.

BlueCross BlueShield of Tennessee Community Trust Diversity Scholarship Award: $10,000 (awarded in two payments of $5,000 each over the course of two consecutive semesters)

Award is given to undergraduate students, selected by the NAHSE Memphis Chapter, who meet the following criteria:

* Applicant must be a promising minority student who is a college sophomore or junior, by the application deadline, enrolled full-time in an accredited college or university program with the intent to obtain a degree to pursue a career in the field of health care.
* Applicant must be a citizen of the United States.
* Applicant must reside within the state of Tennessee.
* Applicant must be matriculating during the current academic school year.
* The applicant must attend an accredited college/university within the state of Tennessee.
* Applicant must have a minimum academic GPA of 2.5 or above on a grade point average scale of 4.0.
* Applicant must be between the ages of 18 to 23 years by the application deadline.
* Each individual should submit a completed application which includes (1), an academic transcript, (2) two recommendations - one academic, one community service, (3) a one-page biographical sketch, (4) an essay and (5) a passport size photo (which once submitted will be the property of the NAHSE Memphis Chapter).
* A telephone interview is also a mandatory part of the application process.

**Essay Topic**

Please complete a 500-word essay on the following topic. The document should be double spaced. Be sure to include your name in the header on all the pages of the document.

Health care is a broad field with many disciplines. Please discuss your particular field of study and why you chose to pursue a career in health care. Also discuss how you plan to use your skills or knowledge to help raise awareness of health issues in your community.

**Deadline**

All submitted applications must be postmarked by **April 1, 2016**. Completed applications can be e-mailed to [**nahsememphis@gmail.com**](mailto:nahsememphis@gmail.com)**.** Applications can also be mailed to:

NAHSE MEMPHIS CHAPTER

Attn: Selection Committee

##### P.O. BOX 40051

#### Memphis, Tennessee 38174-0051

Incomplete applications will not be considered.

**Diversity Scholarship Application**

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| --- | --- | --- | --- | --- | --- | --- |
| First | | Last | | | M.I. | Date |
| (Mr./Mrs./Ms). | |  | | |  |  |
| Permanent Address | | | | | | |
| (Street)    (City) (State) (Zip Code) | | | | | | |
| Ethnicity (check one) | | | | | | |
| African American  Hispanic  Asian  Native American  Hawaiian or Pacific Islander  Two or More Races | | | | | | |
| Home Phone Number | School Phone Number | | | Mobile Phone Number | | |
|  |  | | |  | | |
| Email Address | Birth Date | | | Student ID Number | | |
|  |  | | |  | | |
| Name and Address of college attending | | | | | | |
|  | | | | | | |
| Current Classification in School (check one) | | | Student Status (check one) | | | |
| Sophomore  Junior | | | Full Time  Part Time | | | |

|  |  |  |
| --- | --- | --- |
| Your present academic major or the major you intend to pursue. Please describe how the major relates to a career in health care. | | |
|  | | |
| Grade Point Average |  |

|  |
| --- |
| Community and Extracurricular Activities |
|  |

|  |
| --- |
| Certificates and Awards |
|  |

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| --- |
| How did you learn about the scholarship (check one) |
| School counselor  Community agency  A friend  Social media (such as Facebook or LinkedIn)  Other (please describe): |
|  |

**REQUIRED DOCUMENTS** (Incomplete application packets will not be considered.)

Each individual should submit a completed application which includes

1. An academic transcript

2. Two recommendations (one academic and one community service).

3. One-page biographical sketch (for example, noting applicants’ employment history, involvement with community, extracurricular activities, or honors received).

4. A 500-word essay.

5. Passport size photo (which once submitted will be the property of the NAHSE Memphis Chapter).

**APPLICANT ACKNOWLEDGEMENT and SIGNATURE**

I have read and understand all the eligibility and application requirements, and have completed the application truthfully.

Applicant Signature Date