DR. GROVER W. WHITE SCHOLARSHIP PROGRAM
Eligibility Criteria and Application Procedures

The Scholarship
This scholarship program is funded by an endowment at the Community Foundation of Gaston County and serves as a lasting memorial to the late Dr. Grover W. White, a respected Urologist in Gastonia for 33 years. His family purposely chose the geographic area involved in the program as a gesture of respect for his hundreds of patients and their families as well as friends whose gifts helped establish the endowment.

The amount of the initial scholarship shall be $1,500.00. Recipients are eligible to apply for renewal. Applications must be received by March 2. To receive renewal, the recipient must maintain high academic standards satisfactory to the selection committee. The scholarship amount and renewal policy is subject to change based on availability of funds.

Eligibility Requirements for Application
A. The applicant must be a resident of Gaston, Cleveland or Lincoln County, North Carolina or York County, South Carolina who will attend an educational institution in North or South Carolina.
B. The applicant must be seeking an advanced degree in a medical related field; i.e. MSN, or Nurse Practitioner, MD, DDS, PA, PT, must already hold a bachelors degree or higher with a 3.50 GPA minimum, and must be attending or have been accepted at an appropriate school for the chosen field at the time of application.

Selection Criteria
The Selection Committee’s awards shall be based on its analysis of the applicants’ serious interest in the field of eligibility, successful undergraduate academic record, and evidence of the applicant’s choosing the profession with a motivation of service to people. Financial need is also one basis for selection, though not the sole consideration.

Application Procedure
The applicant must submit a completed application form (application and address on reverse side of this page) by March 2nd. The application must be accompanied by the following:

- The applicant’s personal letter outlining his or her need and desire for the scholarship.
- Two (2) letters of recommendation:
  a) 1 from an undergraduate or graduate professor
  b) 1 letter of character – from a non-family member
- Documentation of undergraduate academic record and acceptance at an accredited Carolinas school offering the desired professional education.

Other Provisions
This program shall be operated without any discrimination as to applicants’ race, gender, or religious creed. Further, because this endowment is structured and operated as a tax-exempt entity, its administration shall in all respects be subject to the provisions of the Internal Revenue Code of 1986, as amended from time to time. Accordingly, should there be a conflict between the above provisions and the provisions of the Internal Revenue Code and regulations, the provisions of the Code shall control.
# DR. GROVER W. WHITE SCHOLARSHIP Application

## Personal Information

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## Educational Information

Are you currently enrolled in a graduate course? Where? ________________________________________________________________

Graduate School at which you are accepted ________________________________________________________________

What advanced degree are you pursuing? ________________________________________________________________

Planned Graduation Date ________________________________________________________________

Undergraduate Degree ____________________________________________ BA _____ or BS _____

Undergraduate School/ Medical Program ________________________________________________________________

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<th>GPA</th>
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Honors Received ________________________________________________________________

Please list other training/ programs completed that apply to chosen field of study:

______________________________________________________________

Please list any employment that would apply to chosen field of study:

1. ___________________ Date: from _____ to _____

   Describe position ________________________________________________

2. ___________________ Date: from _____ to _____

   Describe position ________________________________________________

Please list any volunteer/ extracurricular activities:

______________________________________________________________

Please See Reverse for Required Materials & Return Application on or Before March 2nd
To: White Scholarship, Community Foundation, 1201 E. Garrison Blvd., Gastonia, NC 28054