



**Changing Lives Scholarship
Undergraduates
College of Health Care Sciences
Deadline: May 1**

Requirements:

- **First come first serve, minimum award \$1,000**
- Undergraduate student
- Full time enrollment
- Complete the Free Application for Federal Student Aid (FAFSA)
- Good academic standing

Personal Information:

Applicant Name: _____

NSU Student ID #: _____ Email: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Program Information:

Projected number of credits for the upcoming academic year: Fall _____ Winter _____

Program enrolled in: _____

Cumulative GPA: _____ Most recent GPA: _____

Please mail completed application to:

Nova Southeastern University
Horvitz Building
Attn: Scholarship Department
3301 College Ave.
Fort Lauderdale, FL 33314

In order for your application to be considered, please complete application before deadline date. **We will NOT accept faxes. Due to the volume of applications received, you will only be notified if selected.*

I certify that the information on this form is true and complete to the best of my knowledge. If asked by an official of Nova Southeastern University, I agree to provide documentation, which can substantiate the information provided on this form. This may include official transcripts or letters of recommendation. I understand that failure to comply with this request for further information may prevent my application from being considered.

Applicant's Signature

Date