



BETSY BAPTIST SCHOLARSHIP APPLICATION

(ASCLS-OR)

ABOUT THE SCHOLARSHIP:

In 2012, beloved Laboratory Science professional and teacher, Betsy Baptist, set up a scholarship to assist future laboratory scientists in achieving their career goals. This scholarship, administered by ASCLS-OR, will be granted to the student in Oregon who **best** demonstrates active participation in the professional organization and whose goals include continuing work with the professional organization, preferably in Oregon. Monetary need will not be a factor in the decision.

SCHOLARSHIP ELIGIBILITY - GUIDELINES:

1. Applicant must be a member of ASCLS-OR.
2. Applicant must be admitted to a Laboratory Science program.
3. Applicant must fall into one of the following professional categories:

Category	Description
A	Previously certified professional in the laboratory science field returning to school to advance professionally by seeking a degree from one of the Oregon based programs.
B	Current student of any full time Laboratory Science Programs located in the state of Oregon.
C	Oregon resident working professional enrolled in an online program seeking a degree in Laboratory Science.

APPLICATION PACKAGE INCLUDES:

1. Betsy Baptist Scholarship Application, version 9.0 or later.
Earlier application versions will NOT be accepted.
2. Official transcript(s) from the two most recent college/university listed in this application.
3. Letter of Intent: In a short essay of no more than 500 words describe what made you pursue a career in Medical Laboratory Science, your plans for being involved in ASCLS and your career goals. Financial need will not be a determining factor in scholarship award decisions.
4. Two (2) Letters of Reference: Letters of reference should speak to the student's career aspirations and professional conduct. They should be written by professional or educational contacts, not family members.
5. Copy of an Admission Letter to the Laboratory related program the student is enrolled in.

Submit the application package no later than March 31.

Name (last, first, middle initial):		
Permanent address (street address, city, state, ZIP):		
Phone:	Email:	
Applicant Professional Category (circle 1) A B C		
Please circle one: A. U.S. citizen B. Permanent resident (green card holder)		

2. CLS/MLT PROGRAM ADMISSION STATUS:

Type of program (circle one):		A. MLS	B. MLT	C. Online degree
Name of program:				
Name of school/university name:				
Address of school/university program:				
Program director or designee:		Program director or designee email:		
Anticipated graduation or completion date:				
Current GPA (<i>from the degree program</i>):				

3. EDUCATION

College/University	Dates attended	Major	Degree

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4. EXTRACURRICULAR ACTIVITIES RELATED TO CLINICAL LABORATORY SCIENCE:

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5. HONORS, CITATIONS:

Award name	Significance of award	Date received

6. PROFESSIONAL ORGANIZATION MEMBERSHIP:

ASCLS Membership (required)		
Member ID#:	Year joined:	Dues paid until (mm/dd/yyyy):

Other Scientific Societies			
Society	Membership #	Dates belonged	Offices Held

7. VOLUNTEER AND/OR WORK EXPERIENCE (list most recent first):

Employer	Position/job description	Dates of employment

8. INVOLVEMENT IN ASCLS:

Professional Meetings / Volunteer Opportunities	Date	Location

Leadership Offices held	Description of Duties

9. SIGNATURES:

I hereby certify that all information in this application is true:

Date:
Print:
Signature of applicant:

WHERE AND WHEN TO SEND APPLICATION:

Submit the complete application packet to ASCLS-OR Director of Scholarships via email at lacsage@gmail.com or submit a physical packet to:

Laura Sage
225 NW 4th CT
Sublimity, OR 97385

Packet must be **received** by the Director of Scholarships no later than March 31.

Note: pdf of transcripts and letters preferred.

WHEN THE RECIPIENTS WILL BE ANNOUNCED:

Recipients will be announced April-May, at the ASCLS-OR Board of Directors Meeting. Scholarship funds will be distributed to awardees at the May meeting or by proxy.