



Scholarship Application

Thank you for taking the time to apply for a CHI Scholarship! Please be sure to submit this completed application with a copy of your curriculum vitae, a photo and two letters of recommendation. **Applications Due: October 1*** for travel dates between January - June; **May 1*** for travel dates between July - December.

*Some exceptions apply.

TODAY'S DATE: _____

SCHOLARSHIP APPLYING FOR:

- Medical Student Scholarship
- Health Sciences Student Scholarship -
- 'Bouskaship' for Public Health Scholarship
- Benzoni Scholarship
- Physicians of the Rockies - must apply directly with them; not with CHI

TRIP DATES: _____

APPLICATION INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

How did you learn about CHI? _____

EDUCATION

College/University _____

Major(s) _____ Graduation Date _____

Graduate School _____

Major(s) _____ Graduation Date _____

PLEASE DESCRIBE WHY YOU WANT TO BE A CHI VOLUNTEER. Feel free to use up to one for your response to the questions below.

Why have you chosen to volunteer with us? What do you hope to gain from being a volunteer? What motivation do you have to be a CHI Volunteer? Why did you choose Haiti? What are your future career plans or goals?

Please email to Annie Vander Werff at annie.vanderwerff@chihaiti.org

Working in solidarity to create healthy, empowered, and self-directed communities in Haiti

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