



# Oregon School of Massage – Siderius Scholarship

## **SCHOLARSHIP OPPORTUNITY**

OSM is currently accepting scholarship applications from eligible students enrolled in the massage training program.

## **SCHOLARSHIP DESCRIPTION**

- **\$1,000 Tuition Scholarship** ~ Recipient will receive a \$1,000 reduction in tuition to be dispersed over one or more quarters.

## **ELIGIBILITY CRITERIA**

- Student applicant must have successfully completed all admissions requirements of OSM and been enrolled in the massage training program.
- Students are eligible to apply after successful completion of the Massage Fundamentals course.
- Student should demonstrate a sincere commitment to their education in the healing arts.
- Student must demonstrate a significant financial need.
- Student must demonstrate satisfactory academic and professional performance as defined in the OSM Program Catalogue/Student Handbook.
- Students are only eligible to receive one scholarship award.

## **APPLICATION PROCESS**

- Student must meet all eligibility requirements and submit completed Scholarship Application with required materials to Morgan Neil (Salem Admissions and Student Services Coordinator) by **5pm, May 21st, 2020.**
- Student may be asked to complete an interview with the Admissions Coordinator, Director of Education and other school officials.
- Applicants who are not awarded may reapply for future scholarship opportunities.

## **METHOD OF DISBURSEMENT**

- The scholarship recipient & all student applicants will be notified of decision by **May 28th.**
- Scholarship funds will be applied to the recipient's account for tuition costs quarterly, as award stipulates.
- Recipients who do not maintain satisfactory academic progress will forfeit scholarship award.
- Scholarship awards have no cash value.

# OSM SCHOLARSHIP APPLICATION

Instructions: Please complete this application form and attach listed requirements. Send to Morgan Neil at the Salem campus: [mn@oregonschoolofmassage.com](mailto:mn@oregonschoolofmassage.com)

Please indicate the campus where you are enrolled: \_\_\_\_\_ Portland \_\_\_\_\_ Salem

Please Print - Student Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**1. Essay – Please select one of the following topics to write an essay (no more than 500 words.). If you have previously applied, select a different topic.**

- a. Describe three ways in which your massage career will enrich your life and your community.
- b. What have you done outside of the classroom that demonstrates qualities sought after by school and employers? Of these, which means the most to you?
- c. What are your dreams of the future? How does this scholarship fit into your plans for the future?

**2. Financial Need - On a separate page please describe why a scholarship is financially important to you.**

**3. Income and Expenses –**

**Monthly Income:** Self \$ \_\_\_\_\_ Partner \$ \_\_\_\_\_ Other Income \$ \_\_\_\_\_

**Expenses:** Mortgage/rent \$ \_\_\_\_\_ Groceries \$ \_\_\_\_\_ Utilities/Phone \$ \_\_\_\_\_

Credit Card Debt \$ \_\_\_\_\_ total \$ \_\_\_\_\_/month

Student Debt (other than OSM) \$ \_\_\_\_\_ total \$ \_\_\_\_\_/month

Car Payment \$ \_\_\_\_\_ Health Care \$ \_\_\_\_\_ Personal \$ \_\_\_\_\_ Other (explain)\$ \_\_\_\_\_

What is your payment plan with OSM? Quarterly \_\_\_\_\_ Tuition Agreement \_\_\_\_\_ Monthly Payment Plan \_\_\_\_\_ Loan \_\_\_\_\_

**4. References: Please provide 2 references who support your decision to study massage therapy.**

**Full Name:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

***I certify that the information contained in this application and essay is true and correct. I understand that upon submission of this application, the application becomes sole property of OSM.***

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**FOR SCHOOL USE ONLY** Program start date: \_\_\_\_\_ Date Application received: \_\_\_\_\_

**Scholarship Committee – Circle one:**

I do/do not recommend this applicant for a scholarship \_\_\_\_\_

Signature - Admissions

I do/do not recommend this applicant for a scholarship \_\_\_\_\_

Signature - President

Scholarship Amount Approved \$ \_\_\_\_\_

Effective date: \_\_\_\_\_