

2024-2025 Rural Behavioral Health Workforce Development SCHOLARSHIP APPLICATION

(for students seeking their final year of education at UNR)

Student Financial Services

1500 College Parkway, Elko, NV 89801 (Phone) 775.327-2095 (Fax) 775.327.5105 Email: financial-aid@gbcnv.edu Web site: www.gbcnv.edu/financial

 Priority deadline for submitting the Rural Behavioral Health Workforce Development Scholarship application is Friday, June 28, 2024, by 5:00 p.m.

Applicant Data						
Name	Student ID#:					
Address	Mobile phone #:					
City/St/Zip	Date of Birth:/					
	Email address					
	Checklist:					
F	PLEASE READ AND SIGN THE FOLLOWING STATEMENT:					
After complet	tion of my degree, I intend to work in rural Nevada as a social work professional. IGNATURE:					
	tatement (last page of application). Do not include your name, spouse, or name in your statement.					
□ Transcripts:	An unofficial copy from My GBC Self-Service Center is acceptable (MUST BE ATTACHED)					
>	Provide a high school transcript if enrolling directly from high school or have not attended college elsewhere.					
>	Provide unofficial GBC transcript, if you are currently enrolled in classes at GBC (MUST BE ATTACHED)					
>	If you have attended college elsewhere, provide official transcript(s) from that institution					
□ Educational	I degree objective (must match with the GBC Admission and Records Office)					
□ Signed and	dated Authorization to Disclose Educational Records (see page 2)					
□ Signed and	dated Certification (see page 2)					

This application becomes complete and valid when all the documentation above has been submitted.



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AUTHORIZATION TO DISCLOSE EDUCATIONAL RECORDS and **CERTIFICATION**

I,	_, hereby authorize Great Basin College to release my education records,						
including directory and non-directory information and records pertaining to my application for financial aid, to							
Great Basin College Foundation until I	withdraw this authorization.						
The released education records will be used for the purposes of evaluating my eligibility to receive							
scholarships, correspondence with scholarships donors, and press releases relating to scholarships recipients.							
I expressly authorize Great Basin College Foundation to disclose my education records for these purposes.							
I understand that by signing this authorization, I am waiving my rights of nondisclosure of these records							
under federal law only as to the person or persons specifically listed. This release does not permit the disclosure							
of these records to any other persons of	or entities without my written consent.						
Additionally, I give Great Basin College and Great Basin College Foundation permission to use my							
photograph/video for the purpose of pu	blicity associated with scholarships awarded. This release is intended to						
discharge any and all claims and dema	nds arising out of or in connection with the use of photography/video in						
which my image appears, including any	and all claims for libel or invasion of privacy. I hereby grant Great Basin						
College and Great Basin College Found	dation the ownership and full use of any photographs/videos that are taken.						
I certify that all information I had	ave provided on the GBC Scholarship Application is true and complete to the						
best of my knowledge. I acknowledge	that if I am selected to receive a scholarship, it is my responsibility to						
understand the requirements of the spe	ecific scholarship.						
Date	Print Name:						
	Student's Signature						
How to sign a PDF form:	Student's GBC ID (ten digit) #:						
Open a PDF document in Acrobat DC.							
Click the "Fill & Sign" tool in the right pane							

Sign your form:

Click "Sign" in the toolbar at the top of the page. Then draw (sign with mouse) or choose an existing digital signature or create a new one. . Then click "Apply" to place your signature on the form. If you are not able to sign electronically you can print and sign.

A typed signature will not be accepted

Арр #:	
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		High School Da	ata	
Official School Name		0	Graduation Date/	
Name of Cou	nty and state where	you graduated from	high school	
GED (date &)	/ear obtained)			
		Other:		
Optional Respo	onse/Ethnicity: Asiar	n Hispanic or Latino	Black/African Americar	n White
Gender :	Ame MALE FEMAL		Native Native Hawaiiar	n/Other Pacific Islander
		Residency:		
Are you are re	sident of Nevada?	YES NO		
Are you a U.S	. citizen? YES	NO		
Residential Pr	eference: On Ca	mpus Off Camp	ous (please select on	e)
Are you a Vete	eran? YES N	0		
Do you do volu	unteer work in your	community? YES	NO If yes, please ex	plain your essay.
		Enrollment		
Number of cr	redits you plan to e	enroll for:		
Fall 2024	1-8 credits	9- 11 credits	12 or more (<i>plea</i>	se check one)
Spring 2025	1-8 credits	9- 11 credits	12 or more (<i>plea</i>	se check one)
		College Data		
Credits comple	eted at Great Basin	College:		
·				YES NO
				ILO NO
		Education Object		
		Education Object GBC Admission and		

Personal Statement

500 word limit