

MENTAL HEALTH ASSOCIATION SCHOLARSHIPS 2010

For persons working in the field of mental health continuing their education

The Mental Health Association Scholarship is awarded annually to qualified persons advancing their education in the field of mental health/substance abuse. Applicants must currently work in the field of mental health. The applicant must be employed in Okaloosa or Walton Counties. Prospective recipients shall:

- provide a transcript, license, or diploma certificate that indicates an accredited undergraduate or graduate degree
- include a letter of endorsement and support from current employer,
- provide a letter of acceptance to a college/university offering an accredited advanced degree program in an area of mental health/substance abuse,
- complete the attached scholarship questionnaire,
- include two letters of recommendation, and
- Interview with the MHA Scholarship Committee

Funding

The Gralnick MHA Scholarship committee annually awards up to two \$3000 scholarships to the persons selected by the Board. The recipients will be recognized at the Annual MHA Awards Reception in May and the funding will be sent to the applicant's college/or university.

TimeLine

Completed applications must be received in the MHA office by Monday, April 5, 2010. They should be mailed or faxed:

Mental Health Association of Okaloosa/Walton County
571 Mooney Road, NE
Fort Walton Beach, FL 32547
Fax: (850) 244-2573

Interviews

Interviews will be Friday, April 9, 2010 at 1:00 p.m. at the Mental Health Association office at 571 Mooney Road, Fort Walton Beach. The MHA will call to inform you of your interview time. The Committee will interview the applicants in regard to the application questions.

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Please print or type all information. Use additional paper if needed.

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| Name (first, middle, last) | |
| Address: | street City & zip |
| Telephone | Home |
| | Cell |
| Birth date | |
| Current Place of Employment | |
| Current Supervisor's Name | |
| Supervisor's Contact Number | |
| University and Department Chair's name, address, phone and email | |
| Have you been accepted? | |
| When do you plan to start? | |
| What degree are you pursuing? | |
| List organizations of which you are a member | |
| List special honors, awards that you have received and the year | |
| List your present and past community service or community organizations and the year | |

Please answer the following questions:

What made you decide to enter the field of mental health?

What successes do you feel that you have accomplished in your profession?

What else do you plan to achieve or accomplish in your professional career?

Why do you think you would be a good recipient of the MHA scholarship?

Remember to attach your transcript and two letters of recommendation, plus the letter of support from your employer, and proof of acceptance from the Advanced Degree College or University.