



**PennState**  
Harrisburg

## United Concordia Endowed Scholarship 2019/2020

We are pleased to announce that we are seeking applications for the United Concordia Endowed Scholarship.

**Purpose:** The purpose of this scholarship shall be to provide recognition and financial assistance to outstanding graduate students enrolled or planning to enroll in the Health Administration Master's Program in the School of Public Affairs at Penn State Harrisburg who have a demonstrated need for funds to meet their necessary college expenses.

**Eligibility:** Consideration for this scholarship shall be given to all full-time graduate students enrolled or planning to enroll in the Health Administration Master's Program in the School of Public Affairs at Penn State Harrisburg who have achieved superior academic records or who manifest promise of outstanding academic success, and who have a demonstrated financial need.

**Term:** The fellowship will include a tuition scholarship. The number and amount of the awards are based on the amount of the available funds. This scholarship is applicable for the upcoming **Fall 2019 - Spring 2020** academic year only. Scholarships are not transferable to other semesters. Any remaining funds revert back to the scholarship fund. Funding is applied directly to the awardee's 2019-20 PSU tuition account.

Completed application, including a **current resumé/curriculum vitae**, are due **by Monday, April 1, 2019** to Jordan Stimeling, jxs2533@psu.edu, School of Public Affairs, Penn State Harrisburg, 777 West Harrisburg Pike, Middletown, PA 17057; Fax: 717-948-6320.

**\* This file should be saved to your device and then completed as a fillable pdf document. \***

**PENN STATE HARRISBURG**  
**United Concordia Endowed Scholarship**  
**2018/19 Application**

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<b>Name</b>	(last)	(first)	(mi)
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PSU Student ID Number	Telephone (home/cell)	Email address
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Address	(street)	(city)	(state)	(zip)
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Please address **(a)** how you became interested in health care; **(b)** your current involvement in health services, if any; **(c)** your career goals as related to health care management and policy; and **(d)** the number of credit hours you intend to take. Use additional sheets if necessary.

**(a)**

(b)

(c)

(d) Academic credit hours you intend to take in the academic year 2019-2020 (Fall and Spring semesters) \_\_\_\_\_

Printed Name

Signature

Date

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