



MSDU Student Grant Application

MSDU Annual Seminar Year _____ 2020

STUDENT INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone (_____) _____ Email _____

******Please note: Notification of grant awards will be made via email, applicants will have 48 hours to respond and accept grant.******

PROGRAM INFORMATION

Student Graduation Date (MM/YY) _____

School Name _____

Program Director _____

Program Director Signature _____

Phone (_____) _____ Email _____

To be eligible to apply for a student grant, applicants must be:

- 1.) Enrolled in a diagnostic medical sonography, cardiovascular technology or echocardiography program,
- 2.) If selected to receive a grant, the applicant must register for the entire seminar, and
- 3.) Applicant must be a MSDU member in good standing. Applicant may submit member application and student membership fee at the time of grant application.
- 4.) Must not receive additional tuition reimbursement from other institutions or organizations for the 2020 MSDU Spring Seminar.

MSDU Annual Seminar grant recipients will be selected via a lottery drawing of all applicants received by **April 1st, 2020**. The student grant amount is currently at \$100 and will be available for pickup at the registration table on Sunday after the seminar.

Completion of this form does not guarantee receipt of a grant.

Mail completed application to: Meghan Kasper, 1498 Pinewood Drive, Shoreview MN, 55126

-OR- scan completed form to PDF format and email to meghankasper@msdu.org

Notification of grant awards will begin within 7 days of the application deadline. To be considered for a grant, applications **MUST** be received by **April 1st, 2020**.

I understand and will abide by the guidelines stated above. Further, I understand that falsification of any of the information provided will result in the rejection of this grant application.

Student Signature _____ Date _____