

The School of Natural Healing
Dr. John R. Christopher Memorial Scholarship
Scholarship Application

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone: Home (____) _____ Work (____) _____

A limited number of Scholarships are awarded from The Dr. Christopher Memorial Scholarship Fund on a yearly basis. These are Partial and Half Tuition Scholarships. Scholarships are awarded based on the applicant's service to his/her fellow men and according to the applicant's financial needs. Scholarships are for the correspondence course only – not the online school. Scholarship recipients are required to pay all remaining tuition to begin the course and must finish the correspondence program 18 months from the date of registration.

Please answer the following questions as completely and concisely as possible. Type your response to each question on separate sheets of paper. Attach each response to this information sheet.

1. Describe a circumstance(s) in which you have offered out-of- the-ordinary service to your fellowmen. This should be service you have done outside of your job description--service beyond the call of duty.

2. What service will you render once you have met your educational goals with The School of Natural Healing? Please be specific.

3. Describe any financial situation that would keep you from attaining your educational goals.

Optional Questions:

1. Describe any occasion where you have donated to increasing health awareness in underprivileged populations (any aspect of health).

2. How have you defended herbs? (i.e.: writing editorials, getting involved in government decisions, etc.)