



## 2024 Paramedic Sprint Scholarship application

\*You must be a Montana resident to be eligible for these scholarship funds\*

**Priority Deadline: June 21, 2024.** The scholarship selection will be made after the competitive program applications have been submitted and reviewed.

### Scholarship Structure

Paramedic Sprint program students are eligible for sizeable scholarship amounts via the State Sprint Degree program, **ranging from \$1,500 up to \$3,500/student**. The program has limited scholarships available; students are eligible for these dollars when they are admitted to the program, have registered for classes and submitted this scholarship application form. If a student chooses to exit the sprint program, they are not required to payback Sprint Degree scholarships, but the funds are not available for transferring to a different program.

Students that are awarded the scholarship dollars will have those funds evenly distributed among the semesters they are needing to complete the courses (Fall 2024, Spring 2025 and Summer 2025). Exact amount of the scholarship will be determined once the Sprint selection process has been finalized.

To be considered for sprint scholarship funds this [scholarship form](#) must be submitted by **June 21, 2024**.

To maintain eligibility, students must pass all required courses with a minimum of a "C" grade.

Legal Name \_\_\_\_\_  
(Last) (First) (Middle)

Preferred Name \_\_\_\_\_  
(Last) (First) (Middle)

Phone (Cell/Mobile) \_\_\_\_\_ Email address: \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

MSUB Student ID # \_\_\_\_\_

Term entering Sprint program: \_\_\_\_\_

Have you applied for Federal Financial Aid (grants, loans, workstudy)?  Yes  No  Plan to

Will your employer be assisting you with some educational costs (tuition/fees/textbooks):  Yes  No

If your employer is assisting with costs, Do they distribute the funds at the

- beginning of the semester directly to the college or  
 directly to you at the end of a semester after you submit a transcript with grades?

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Please indicate below your employer and name of individual that can discuss funding: (our business office and/or financial aid office may need to contact them)

\_\_\_\_\_  
Employer Employer contact name

\_\_\_\_\_  
Employer contact phone Employer contact email

\_\_\_\_\_  
Student Signature Date

Please submit scholarship application to: **Stephanie Cowen, Jacket Student Central – City College; 3803 Central Avenue, Billings MT 59102 or email scowen@msubillings.edu**

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Office Use Only

\_\_\_\_\_  
Starting Semester Student registered Planned number of semesters to earn degree

\$\_\_\_\_\_/Number of terms = \$\_\_\_\_\_/semester

Funds to be distributed each semester (equal distribution) \_\_\_\_\_  
MSUB Advisor signature/date

Submit copy of forms to: MSU Billings Financial aid Office: \_\_\_\_\_  
MSU Billings Business Office: \_\_\_\_\_