



MAXIE COLLIER SCHOLARS PROGRAM  
College of Behavioral and Social Sciences  
2500 W. North Avenue, HHSB 339  
Baltimore, MD 21216

**STUDENT APPLICATION**  
**PERSONAL INFORMATION**

Name: Click or tap here to enter text.

CSU ID#: Click or tap here to enter text.

Current Address: Click or tap here to enter text.

Primary Phone #:Click or tap here to enter text.

Cell #: Click or tap here to enter text.

CSU Email: Click or tap here to enter text.

Personal Email:Click or tap here to enter text.

Permanent Address (If different from above): Click or tap here to enter text.

Date of Birth: Click or tap to enter a date.

Gender (Please check - Optional): Choose an item.

U. S. Citizen? (Please check) Choose an item.

State of Maryland Resident? (Please check) Choose an item.

Race/Ethnicity (Please check - Optional): Choose an item.

In case of an emergency, notify: Click or tap here to enter text.  
Emergency Contact Phone #: Click or tap here to enter text.

2

Name and Location of High School: Click or tap here to enter text.

Honors, Awards, Scholarships, etc.:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

**WORK EXPERIENCE:**(List most recent position first - full and part-time)

1. Employer Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Position Held: Click or tap here to enter text.

Dates Position Held: Click or tap here to enter text.

Duties: Click or tap here to enter text.

2. Employer Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Position Held: Click or tap here to enter text.

Dates Position Held: Click or tap here to enter text.

Duties: Click or tap here to enter text.

3. Employer Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Position Held: Click or tap here to enter text.

Dates Position Held: Click or tap here to enter text.

Duties: Click or tap here to enter text.

**VOLUNTEER EXPERIENCE:**

1. Organization: Click or tap here to enter text.

Address: Click or tap here to enter text.

Volunteer Position: Click or tap here to enter text.

Dates Position Held: Click or tap here to enter text.

Duties: Click or tap here to enter text.

2. Organization: Click or tap here to enter text.  
Address: Click or tap here to enter text.

Volunteer Position: Click or tap here to enter text.  
Dates Position Held: Click or tap here to enter text.  
Duties: Click or tap here to enter text.

3. Organization: Click or tap here to enter text.  
Address: Click or tap here to enter text.

Volunteer Position: Click or tap here to enter text.  
Dates Position Held: Click or tap here to enter text.  
Duties: Click or tap here to enter text.

3

**REFERENCES:**

List the three references who are submitting Letters of Recommendation on your behalf. (Two faculty members who have taught you within the last 2 years, and one community person).

Name: Click or tap here to enter text.  
Address: Click or tap here to enter text.  
Contact #: Click or tap here to enter text.

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Address: Click or tap here to enter text.  
Contact #: Click or tap here to enter text.

Name: Click or tap here to enter text.  
Address: Click or tap here to enter text.  
Contact #: Click or tap here to enter text.

THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS FACTUAL, AND SHALL NOT BE PUBLICLY DISCLOSED EXCEPT AS REQUIRED BY LAW.

APPLICANT'S TYPED NAME: Click or tap here to enter text.

DATE: Click or tap to enter a date.

## **Maxie Collier Scholars Program Application**

### **PERSONAL STATEMENTS**

**Please respond to the following three questions:**

- 1. Why do you want to participate in the Maxie Collier Scholars Program (500 words max):** [Click or tap here to enter text.](#)
- 2. Why are you interested in a career in behavioral health? (500 words max):** [Click or tap here to enter text.](#)
- 3. What are your ultimate career goals? (500 words max):** [Click or tap here to enter text.](#)

**MAXIE COLLIER SCHOLARS PROGRAM  
APPLICANTS' AGREEMENT**

**Please type your initials indicating you have read and agree to the statements below.**

**BEHAVIORAL HEALTH CAREER COMMITMENT:**

As a Maxie Collier Scholar, I understand I am expected to attend graduate school and pursue a behavioral health career in the public sector.

Click or tap here to enter text.

**INTERNSHIP:**

I understand I am expected to complete an internship in behavioral health by the end of the first semester of my senior year. Any exception to completing this requirement must be approved in advance by the Coordinator of the Program. Failure to satisfy this requirement will disqualify me as a Scholar and forfeit my entitlement to Maxie Collier Scholars Program funds.

Click or tap here to enter text.

**HEED 105 Course:**

I understand I am to enroll in and successfully pass the HEED 105 Emerging Issues in Mental Health and Well Being course at Coppin State University prior to graduation.

Click or tap here to enter text.