Application for the Orthopaedic Scholar Institute

Name ___________________________________________________________

Phone (Grace Ext.) ______________________  Cell _________________________________

Email: _________________________________________________________________________

How many semesters do you have left at Grace College? _______________________________

Major (s) __________________________________________Minor(s) ____________________

GPA _________________________________________________________________________

What are your MBTI letters? ______________________________________________________

What are your StrengthsQuest Strengths? ____________________________________________

Extracurricular activities _________________________________________________________

What do you want to be doing 5 – 10 years from now?  _________________________________

______________________________________________________________________________

Why do you want to be a member of the Orthopaedic Scholar Institute? ___________________

______________________________________________________________________________

Why do you want to intern and work in the orthopaedic industry? _________________________

______________________________________________________________________________

What are you passionate about? _____________________________________________________

______________________________________________________________________________

Please return this application to the Office of the Business Department, in the lower level of the OCC.