



Behavioral Health Higher Education Program (BHHEP) Application

Instructions

- **Must be at least a Junior to apply.**
- Complete the BHHEP application in its entirety.
- Please attach the following documents:
 - A current resume.
 - A letter of recommendation from the college/university faculty member to participate in BHHEP.
 - A personal statement from the applicant on why they are a good fit for the program.
 - A copy of transcripts (unofficial copy is acceptable).
 - A copy of your driver's license.
- Submit the completed application to BHARP at theruraldifference@bharp.org.

Date: _____

Name: _____

Date of Birth: _____

Home Address: _____

Phone Number: _____

E-mail: _____

Name of School/University: _____

This document may contain confidential, proprietary, privileged and/or private information. The information is intended to be for the use of the individual or entity designated below. If you are not the intended recipient of this document, please notify the sender immediately, and destroy this document. Any disclosure, reproduction, distribution, or other use of this document by an individual or entity other than the intended recipient is prohibited by BHARP.



Name of Academic Advisor: _____

E-mail contact for Academic Advisor: _____

Degree: _____

Anticipated Year of Graduation: _____

Current Status (select one): **Junior** **Senior**

Current Grade Point Average (GPA): _____

Name of Loan Lenders: _____

I understand that the acceptance in the program requires clearances and background checks per state and federal regulations.

___ **YES**

___ **NO**



I understand the information provided on this application and within the required documentation is true, accurate, and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.

Signature

Date

Please submit the application to theruraldifference@bharp.org