Hubert Bell Allen Scholarship
Due May 25

History
The scholarship is named for Hubert Bell Allen, a graduate of UC Berkeley and the Stanford School of Business, who suffered from the debilitating effects of heart failure for the last fifteen years of his life. A man of boundless generosity and vision, he encouraged his children to follow their passion and impressed upon them that “You can lose everything in life except your education.”

Purpose
The Hubert Bell Allen Scholarship is awarded to doctoral students in the UCSF School of Nursing whose area of interest focus on heart failure and its consequences.

Eligibility
- Doctoral students in any department in the UCSF School of Nursing pursuing studies related to heart failure and its consequences are eligible to apply;
- Be in good standing with at least a 3.0 GPA; and
- There are no citizenship requirements.

Support
The amount of the award is $2,500 for one academic year in fee offsets for 3 quarters. Awardees may reapply in subsequent years.

Responsibilities
Awardees must maintain full-time registered status and satisfactory academic progress.

Application Process
• Download and fill out the general supplemental application and the application addendum from the School of Nursing Financial Aid webpage;
• Submit your most current CV; and
• Submit a reference letter from a faculty member who can speak to your planned or current studies in heart failure and its consequences. Please arrange for this letter’s receipt by the application deadline.

Submission of Application
Submit the completed supplemental application, application addendum, CV, along with the reference letter in person or by mail to:
UCSF School of Nursing Student Funding Office
2 Koret Way, N-319X
San Francisco, CA 94143
Attn: Hubert Bell Allen Scholarship
OR email to SONStudentFunding@ucsf.edu
## Hubert Bell Allen Scholarship Application Addendum

(Please Print or Type)

<table>
<thead>
<tr>
<th>Name</th>
<th>Have you received this award in the past?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No [ ] Yes [ ] If Yes, which year(s)?</td>
</tr>
</tbody>
</table>

### Name of Faculty Member Supplying your Letter of Reference

### Please explain, in the space provided, your current or planned study of heart failure and its consequences

### Applicant’s Signature

### Date

Submit your completed application and reference letter by **May 25** (see information).