



GRAND CANYON UNIVERSITY™

Neighborhood Outreach Access to Health (NOAH) CHEC Employee Scholarship Memorandum of Understanding

Congratulations on your decision to continue your educational goals with Grand Canyon University. In keeping with the University's long-standing tradition of providing excellent educational programs, we are excited to offer you the ***Canyon Healthcare Education Collaboration Scholarship***. This scholarship is only valid for applicants who are employees of Neighborhood Outreach Access to Health (NOAH) and submit a complete application for a program.

By committing to start a bachelor's, master's, or doctoral degree program, or single course/non-degree course through our online or evening-campus offerings*, Grand Canyon University will offer you **20%** off the tuition rate per course for your program. This scholarship will be applied at the same time the tuition charges occur.

While we are pleased to extend this scholarship to you, there are requirements which must be met. In order to remain eligible for this scholarship you must maintain continuous enrollment in your program of study. Continuous enrollment is defined as no breaks greater than 14 days unless an approved leave of absence has been granted by Grand Canyon University. Additionally, you must maintain Satisfactory Academic Progress throughout your program as indicated in the University Policy Handbook located at: <https://www.gcu.edu/academics/academic-policies.php>.

By signing this document, you understand that if you are unable to start your program, this offer will no longer be valid and the scholarship will not be applied.

This scholarship *cannot* be used in conjunction with any other GCU scholarships. This scholarship will be applied toward your tuition only, and you will not receive funds in excess of your charges.

By signing this agreement, you acknowledge that all prior scholarships and/or special tuition offers are null and void. The University will honor the Memorandum of Understanding with the most recent issue date.

NOTE: This MOU must be attached to your application for admission for it to be valid regardless of signatures or any verbal statements made.

CHEC employees must verify by attaching a paystub with sensitive information blacked out.

Name: _____ Date: _____

Signature: _____



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Neighborhood Outreach Access to Health (NOAH) Employee Verification Form

Neighborhood Outreach Access to Health (NOAH) Employee #: _____

Name: _____

Address: _____

Evening Telephone Number: _____

Email Address: _____