

The *Toni McBride* Wellness Scholarship Cornell University Wellness Program

The *Toni McBride* Wellness Scholarship offers reduced fee scholarships to staff and faculty who wish to join the Wellness Program. It is named after Toni McBride (1960-2004), the first director of the CU Wellness Program. In the spirit of Toni McBride's nurturing and compassionate personality, this scholarship provides assistance to those eligible employees who cannot afford the full cost of the program, but who truly benefit from the connection to our caring staff to improve their joy, balance, and well-being.

The Cornell University Wellness Program budget has funds to subsidize a limited number of Wellness memberships by 50% (\$87.50 per year). Employees may apply for a scholarship based on all the criteria below.

- You must be a benefits-eligible Cornell University employee or retiree. Spouses, partners, CU affiliates are not eligible. The scholarship is also available to employees in the one year layoff status.
- You must have an *annualized* income (as verified in CU's payroll system) of \$45,000 or less to apply for a scholarship. For example, if you work part time, your annualized income would be your current salary if you worked full time.
- Relevant circumstance for applying for the scholarship (explain below).
- Scholarships are effective until June 30th each year. Scholarship recipients may re-apply if their circumstances still qualify.

This information will remain confidential. Scholarship decisions will be made within one week of receiving this form. Special circumstances are considered and decided by the Wellness Program's director.

Relevant circumstances. Please describe any special circumstances that affect your ability to afford this membership.

Today's Date: _____ Email: _____
Name: _____ Department: _____ Phone number: _____
Job Title: _____ Full-Time: _____ Part Time: _____ Hrs/Wk _____

I certify that all the information included in this application is complete and correct. I give you permission to confirm this information in Cornell's payroll system.

Signature of employee _____ Date: _____

Questions should be directed to Beth McKinney, Director, CU Wellness Program, bm20@cornell.edu or 255-3703.

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