

MONTGOMERY COUNTY MEMORIAL HOSPITAL AUXILIARY
STUDENT SCHOLARSHIP APPLICATION

GENERAL INFORMATION

1. Scholarships are open to any graduating high school senior residing in Montgomery County, Iowa.
2. Two \$500.00 one-time (non-renewable) scholarships will be awarded.
3. The recipient must plan on majoring in a health care related field.
4. The recipient must plan to attend an accredited college, university, or trade school.
5. Payment will be made to the accredited college, university or trade school after proof of registration for second semester is received by our organization. The scholarship may be used for tuition or textbooks. The recipient will be responsible for getting this information to us.
6. Include a high school transcript with the application.
7. All information on this scholarship will be treated confidentially.
8. Application deadline post marked by April 10th.
9. Mail application to: Montgomery Co. Memorial Hospital Auxiliary
c/o Public Relations Department
2301 Eastern Ave.
Red Oak, IA 51566

MONTGOMERY COUNTY MEMORIAL HOSPITAL AUXILIARY
STUDENT SCHOLARSHIP APPLICATION

Name: _____

Street Address: _____ City: _____ Zip: _____

Home Telephone: _____ Cell Phone: _____

High School: _____ GPA: _____

School you plan to attend next year: _____

School's address: _____

Have you been accepted? _____

What health field of study or training do you plan to pursue? _____

List activities in which you participated while in high school and any offices held. (Include both community and school activities.) Attach a separate sheet if additional space is required.

Are there any unusual financial circumstances which your family is facing that you would like to have the selection committee consider? (All information will be held in strictest confidence.)

Write a short essay, not to exceed one page explaining why you are interested in the health care field and deserving of this scholarship and what you might be doing five years after graduation.