ARH Scholars Award Application

Appalachian Regional Healthcare (ARH) Scholars Award

A scholarship program designed to help fund the cost of education for those interested in seeking a career in healthcare.

Spring 2020

This application must be completed online and submitted with all portions attached. Partial applications will not be accepted and/or considered. You may only submit your application once, when all sections are completed. Applications will be judged on a blind basis and each section will be awarded points based on merit, achievement and creativity. Applications received after deadline will not be accepted.

| Name: | | |
|-----------------------------------|-------------------------------|--------------------------------------|
| Address: | | |
| City: | State: | Zip Code: |
| Home Phone/Cell Phone: | Birthday: | |
| Social Security Number: | Email Addre | ess: |
| Are you an employee of ARH? _ | Child/grandchild of an e | employee? |
| Current Work Information (If you | are an ARH employee): | |
| ARH Facility: | Years at ARH: | |
| If you are immediate family of ar | a ARH employee, list employee | e's name & facility where they work: |
| ARH Employee/Family Member | Name: | ARH Facility: |
| Are you a high school student: _ | | |
| If so, what high school do you at | tend? | |
| High school graduation date: | | |
| Course of study to be pursued: _ | | |

| Please list any other scholarships or grants you have received. | | | | | |
|---|---|----------------------------|--|----|--|
| Organization | | Scholarship amount awarded | | | |
| | | | | | |
| School providing cour | se of study*: | | (5 points) | | |
| (*Scanned letter of ac | ceptance must be attached to the | nis application.) | | | |
| | rk/school related and a second be attached to this application. | | (10 points) (*One I reference. Scanned copies of | | |
| Please list any volunte | eer activities you have been invo | olved in during t | the last four years. (5 points) | | |
| Activity | Years of Particip | oation | Leadership Roles | | |
| | | | | | |
| Please list any Comm points) | unity service awards or honors | that you have re | eceived in or out of the workplace. | (5 | |
| Activity | Year | | Organization | | |
| | | | | | |
| | | | | | |

Personal Essays*:
1) In 500 words or less please describe what ARH means to you and why you have chosen your course of study. (30 points)

Budget*:

Applicants must develop a detailed budget covering their next year of study. The budget will be used to determine, in part, the amount of the ARH Scholars Award and should cover tuition, books, uniforms, all school-related expenses, transportation, and living expenses. The budget should be very detailed and include all other sources of income, scholarships, and grants associated with this year of study. (25 points)

(*Budget should be submitted as a separate attachment as part of this application.)

Cover Letter*:

In a single page, please submit a cover letter explaining why you are deserving of this award and what contributions will be made by you, upon the completion of your education. (20 points) *Cover letters should be submitted as a separate attachment as part of this application.

Tuition payments will be made directly to the school upon proof of enrollment from Registrar of college.

Applications will be accepted for the current academic session of 2020-2021 by March 22, 2020. Notifications for awards will be announced via registered mail.