

Montgomery County Memorial Hospital Auxiliary

Student Scholarship

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 healthcare 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: **April 15, 2024.**
9. Mail application to:
Montgomery County Memorial Hospital Auxiliary
2301 Eastern Avenue
Red Oak, IA 51566

Application

Montgomery County Memorial Hospital Auxiliary

Student Scholarship

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 in 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 the 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 would like to be doing five years after graduation.