



**ASPIRUS VOLUNTEERS-MEDFORD**  
**2018 HEALTHCARE CAREER SCHOLARSHIP APPLICATION**

*Attachments should be limited to two pages, including references. On attachments, list student name only once at top of page.*

**Personal Information:**

Applicant Name: \_\_\_\_\_ High School: \_\_\_\_\_  
Home address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City/St/Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Academic Information:**

College or Institution: \_\_\_\_\_ Accepted? \_\_\_\_\_  
Degree interest: \_\_\_\_\_

**School Activities, Community Service, Leadership Involvement:**

Organization / Position / Dates -

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List non-school activities, including any jobs you have held: (list most recent first)**

Activity or Employer / Position / Dates -

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach a short statement to address the following questions:**

- 1) Your educational goals and post college plans
- 2) How you plan to finance your education
- 3) What financial assistance means to your education
- 4) What excites you most about the medical field

**References:** Provide 1 letter of reference (not related) familiar with your skills and abilities. We ask that your name is only mentioned once at top of the letter.

**THIS SECTION TO BE COMPLETED BY THE HIGH SCHOOL GUIDANCE DEPARTMENT**

Class rank \_\_\_\_\_ / \_\_\_\_\_ Academic Average: \_\_\_\_\_

Number of days absent: Grade 9 \_\_\_\_\_ Grade 10 \_\_\_\_\_ Grade 11 \_\_\_\_\_ Grade 12 \_\_\_\_\_

\_\_\_\_\_  
Counselor Signature / Date

Application due  
date is:  
  
March 16, 2018