



HEALTHCARE SCHOLARSHIP APPLICATION RULES & GUIDELINES

Dear Student:

Aspirus Volunteers-Medford is an organization whose members promote and support Aspirus Medford Hospital & Clinics through education, volunteer service activities and fundraising.

We will be offering scholarships to eligible graduating seniors (from area high schools) who have been accepted in an accredited college or technical school in pursuit of a career in a healthcare related field.

Application forms may be downloaded from www.aspirus.org/Medfordvolunteers. Any supplemental information should be limited to 2 pages, including references.

Completed applications should be mailed to:

Aspirus Medford Hospital
Attn: Patti Prusinski, Volunteer Coordinator
135 South Gibson Street
Medford, WI 54451

The deadline for submitting applications is: March 16, 2018.

Requirements:

1. Local high school graduate from Medford, Rib Lake, Gilman, Athens, Prentice, Phillips, Owen-Withee, Abbotsford, Colby or Thorp with a GPA of 2.75 or above in pursuit of an education in a healthcare-related career.
2. Accepted in an accredited university or technical institute.
3. Legible application submitted by deadline (stated above).
4. Must have a scholarship agreement signed and dated by parent or guardian.

Other:

1. No restrictions based on sex, age, religion or national origins.
2. Medical-related fields such as: Medical, Nursing, Physical Therapy, Occupational Therapy, Lab, Radiology, Pharmacy, Dietitian, Physician Assistant, Nurse Practitioner or Psychology.
3. Selection made by Aspirus Volunteers Scholarship Committee. If selected, awards announced at an awards/recognition night or other school event.
4. Scholarship funds are sent directly to college or technical school after passing grades are achieved first semester.



ASPIRUS VOLUNTEERS-MEDFORD SCHOLARSHIP APPLICANT'S AGREEMENT

The applicant hereby states that he/she has familiarized him/herself with the rules and guidelines established for the Aspirus Volunteers Scholarship, and that:

- His/her qualifications meet the basic requirements for the scholarship and for college entrance.
- He/she intends to abide by all provisions set forth in the rules and agrees to accept, as final, the decisions agreed upon by the Aspirus Volunteers' Scholarship Committee.

Further, the applicant selected agrees not to hold liable the Committee as a whole, or its members, or the Aspirus Medford Hospital volunteers to any obligations (financial or otherwise) other than those stipulated in the rules, if it becomes necessary at any time to discontinue said scholarship.

If selected, applicant may be asked to provide a graduation photo for publicity purposes. (Do not include with application form.)

Applicant's Name (please print): _____

Address: _____ Phone: _____

E-mail address: _____

Signature of Applicant

Date

Parent(s) Name(s): _____

Signature of Parent or Guardian

Date

We invite all applicants as you complete your studies and research employment opportunities, to consider making Aspirus Medford Hospital & Clinics part of your future plans. Employment information is posted on a regular basis on our website at: www.aspirus.org.