

SCHOLARSHIP APPLICATION

From El Campo Memorial Hospital Medical Scholarship For WHARTON COUNTY GRADUATES

Criteria: Must enter a healthcare/medical field of study

Deadline: Applications are due to your Counselor's Office by -- 4-1-19 (Deadline to be determined by each school counselor).

Name _____ DOB _____ Age _____

School: _____ School Address: _____

Name of Parent/Guardian _____ Do you live with both parents? _____

Father Living? _____ Occupation _____

Employer _____

Mother Living? _____ Occupation _____

Employer _____

Ages of children living at home and supported by family (including self): _____

of Children in college or technical school for the this year and next (including self): _____

Name of post-secondary school you plan to enter: _____

Major field of study you plan to pursue: _____

What are your career goals? _____

College admission test scores: SAT _____ ACT _____ Scores not in yet _____

List all school activities you have participated in the past 4 years:

Activity	# of years	Office
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List work experience during past 4 years and/or organizations / volunteer work:

Please report any unusual circumstances you feel warrants special consideration:

EL CAMPO MEMORIAL HOSPITAL SCHOLARSHIP
MEDICAL / HEALTH FIELD DEGREE

CONTACT: Donna Mikeska, ECMH Managed Care / Marketing Coordinator

PHONE: 979-578-5261

ADDRESS: 303 Sandy Corner Road, El Campo, Texas 77437

DONOR: El Campo Memorial Hospital

AMOUNT OF SCHOLARSHIP: Up to \$1,000.00

AVAILABILITY OF SCHOLARSHIPS WILL BE EVALUATED YEARLY.

CRITERIA:

Rank in class is not a factor.

Recipient can be either male or female.

Student is not required to establish financial need.

Student may attend the University or College of their choice.

Students must enroll in a Healthcare or Medical Field

STIPULATIONS/QUALIFICATIONS:

Participation in certain extracurricular activities is not required but beneficial.

Students from WHARTON COUNTY HIGH SCHOOLS are eligible for the scholarship. Distribution may vary from one school and/or the other.

PHOTO OPPORTUNITIES: El Campo Memorial Hospital Scholarship Committee will select recipients and distribution will take place at the participating schools scholarship banquet if available.

El Campo Memorial Hospital requires a photo of the check presentation to the student at the scholarship banquet and/or at the student's school with the counselor, principal, and/or the superintendent (to be arranged).

DEADLINE: Applications must be submitted to the Counselor's Office prior to the deadline. The Counselor's Office will forward the completed applications to ECMH for the Scholarship Committee to review and select the recipient by mail or email.

COUNSELOR'S OFFICE: Please notify Donna Mikeska in advance as to the date of the Scholarship Banquet. ECMH would like to consider the opportunity to present the scholarship certificate to the recipient.

SCHOLARSHIP CHECK: The selected student must provide a copy of paid receipt for current college attendance in order to receive the scholarship check. Simply mail, email or bring in the receipt to Donna Mikeska at El Campo Memorial Hospital; 303 Sandy Corner Road, El Campo, TX 77437

(dmikeska@ecmh.org) 979-578-5261 (leave a message, name and number)

Indicate an address where you would like the check to be mailed.

CONTACT INFORMATION:

Donna Mikeska

Managed Care and Marketing Coordinator