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Alegent Health Scholarship



2012 Scholarship Guidelines

[Download the scholarship application](#)

Purpose:

To provide scholarship assistance for eligible students preparing for health care careers.

Eligibility:

- High school seniors graduating May 2012 with intent to pursue a post secondary degree in a health care field.
- Applicants must have applied to, and plan to enroll in an accredited college/university.
- Applicants must have and maintain a minimum cumulative GPA of 3.0 or higher on a 4.0 non-weighted scale.

Awards:

Twelve \$1,500 non-renewable scholarships will be awarded for the 2011-2012 academic year.

Application Deadline:

All application materials must be received in our office by Wednesday, February 15, 2012. **No hand written, e-mailed or faxed documents will be accepted.**

Award Notification:

Award recipients will be notified by letter by Monday, March 19, 2012.

Applicant Requirements:

Applicants must assume responsibility for all requirements. **Incomplete or inaccurate applications will not be considered.**

- Applicants must submit two letters of recommendation from individuals other than family. Letters can be from a high school counselor, teacher, coach, principal, vice principal, clergy or employer).
- Each recommendation letter must be in a sealed envelope with the author's signature placed over the envelope flap.
- Both sealed and signed letters of recommendation must

- accompany the application and not be sent separately.
- Applicants must have sent a complete, official, school-issued high school transcript of grades (with official seal). Copies or unofficial transcripts will not be accepted.
- High School transcripts must be converted to a 4.0 scale.

Recipient Requirements:

Recipients are required to assume responsibility for all requirements. ***Any failure to provide the necessary documentation by the stated deadline will result in forfeiture of the award.***

- Recipients must submit a college/university acceptance letter by May 1st.
- Recipients must enroll an accredited college or university as a full-time student (12 credit hours or greater).
- Recipients must submit a fall 2012 class schedule (generated from the college Registrar) from an accredited college or university by August 15th. (This must be received in our office by Wednesday, August 15th).

Scholarship Award Schedule:

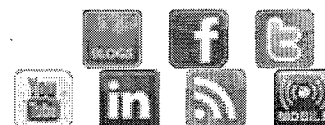
Scholarship award checks will issued the second week of September and sent to the address recorded on the application.

Priority Selection Criteria:

- Scholarship application packet submitted completely and correctly
- Quality of essay (to include presentation, grammar, spelling, and fluency)
- Volunteer service hours logged at an Alegent facility
- Volunteer and community service hours logged
- Participation in an Alegent Career Academy
- Participation in an Alegent Health Care Career Camp
- Ethnic diversity

Questions:

Diane Lee
Alegent Health Workforce Planning Coordinator



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Send completed scholarship application packet to:

Diane Lee, Alegent Health Workforce Planning Coordinator, McAuley Service Center, 12809 West Dodge Road, Omaha, NE 68154

2012 Alegent Health Scholarship Application (For High School Seniors)

Thank you for your interest in the Alegent Health Scholarship program. We have designed this application for you to complete on a computer. No hand written, faxed or e-mailed applications will be accepted. Please take your time and make sure **ALL** sections are complete.

Once you have completed all sections of the application form, print and send to the address on the last page. Complete application packets **MUST BE RECEIVED** in our office by February 15, 2012. Submission of an application does not guarantee an applicant a scholarship.

Section A: STUDENT INFORMATION

First Name:	Middle Initial:	Last Name:
Current Address:		
City:		
State, Zip:		
Home Phone:		
Cell Phone:		
E-mail Address:		

Cumulative GPA: (non-weighted on a 4.0 scale required) _____

Ethnicity:

American Indian/Alaskan Native <input type="checkbox"/>	Asian <input type="checkbox"/>	Black/African American <input type="checkbox"/>
Hispanic/Latino <input type="checkbox"/>	Native Hawaiian/Other Pacific Islander <input type="checkbox"/>	Not specified <input type="checkbox"/>
White <input type="checkbox"/>		

Section B: HIGH SCHOOL

School	City, State	Years Attended	Grade Completed

Section C: WORK HISTORY

Employer	Job Title	Dates Worked MM/YY-MM/YY	Average Hours/Week

Section D: COLLEGE AND CAREER

Chosen Health Career Field:	
1 st Choice College/University:	
City/State of College/University:	

I have applied to this college: Yes No I have been accepted into this college: Yes No

Section E: VOLUNTEER/COMMUNITY SERVICE

Organization	Dates Served MM/YY-MM/YY	Ave Number of Hours/Week	Total Hours Served

Total volunteer hours at Alegent only: _____ Total volunteer hours at all organizations: _____

Section F: HEALTH CARE INVOLVEMENT

Attended	Yes/No	Dates Attended MM/YY	Location
Alegent Health Care Career Camp:			
Alegent Career Academy:			
Health Science Academy:			

Section G: LEADERSHIP

Role	Grade(s) Served 9,10,11,12	Organization

Section I: APPLICANT

I certify that I _____ (student name) am the author of all information in this application and that it is true and correct to the best of my knowledge. I understand that an incomplete application packet or one received after the deadline of February 15, 2012 will be disqualified and not considered.

_____(Required) _____
Signature of Applicant Date

_____(Required) _____
Signature of Parent/Legal Guardian Date

Section J: APPLICATION CHECKLIST

- All sections (A – I) of the scholarship application.
- Two (2) letters of recommendation from someone other than family members. Each recommendation letter is sealed with the author’s signature placed over the envelope flap and is included in this application packet.
- Official High School Transcript. I understand that it is my responsibility to make sure high school officials are aware of the application deadline. I am aware that if my high school transcript is not received by the application deadline of February 15, 2012, this will disqualify my application.

Please print your completed application and send all application packet materials to:

Diane Lee
Alegent Health, Workforce Planning Coordinator
McAuley Service Center
12809 West Dodge Road
Omaha, NE 68154

Note: No hand written, faxed or e-mailed copies of applications will be accepted. Complete application packets must be received in our office no later than February 15, 2012 in order to be considered.