

Medical Staff Scholarship Program

The Memorial Hospital of Sweetwater County Medical Staff Scholarship was established to encourage young people pursuing health care careers. The purpose of the scholarship is to provide financial assistance to be used to pursue post-secondary education within the healthcare field. The scholarship shall be open to all applicants, regardless of race, color, religion, sex, national origin, citizenship, or disability, subject to the following restrictions:

1. Applicant must be a current high school senior (graduating in the spring of 2019), enrolled as a student in Sweetwater County

- 2. Applicant must demonstrate successful academic performance of at least a 3.5 cumulative GPA
- 3. Financial need may be considered
- 4. Applicant must be available for interview

Two scholarship recipients will be chosen. One from Sweetwater County School District #1 and one from Sweetwater County School District #2. Each student will receive a \$3,000 check to be made out to the college of their choice. The following criteria will be verified before the checks are issued to the recipients:

- 1. Maintain a 90% or better attendance rate
- 2. Demonstrate an overall positive performance in school and community. This includes NO criminal activity or disciplinary referrals.

Provided that the student maintains the above criteria, the student will receive the scholarship funds upon graduation from a Sweetwater County school. If the student fails to maintain the above criteria, the student will not be awarded any portion of the scholarship fund.

To be considered for the Memorial Hospital of Sweetwater County Medical Staff Scholarship, student must submit the scholarship application, an official transcript of grades, two letters of recommendation, and a personal essay addressing the following:

- 1. Describe your academic performance including grades, homework, attendance, etc.
- 2. Describe the ways in which you have helped others through community service.
- 3. Why are you interested in healthcare?
- 4. What is your chosen field of study?
- 5. Why do you think you would be successful in this field?
- 6. Why do you believe the selection committee should award you this scholarship?

Call 307-352-8334 if you have questions.

7. Why do you need this scholarship?

To apply, please mail attached scholarship application and required documentation to: Memorial Hospital of Sweetwater County Medical Staff Services Office P.O. Box 1359 Rock Springs, WY 82902-1359





Memorial Hospital of Sweetwater County

Medical Staff Scholarship Application

Attach a typed response to the below items. Please limit your essay to three pages:

- 1. Describe your academic performance including grades, homework, attendance, etc.
- 2. Describe the ways in which you have helped others through community service.
- 3. Why are you interested in healthcare?
- 4. What is your chosen field of study?
- 5. Why do you think you would be successful in this field?
- 6. Why do you believe the selection committee should award you this scholarship?
- 7. Why do you need this scholarship?

Required Attachments:

- Two letters of recommendation:
 - -One from a teacher, principal, counselor, activity sponsor, or coach
 - -One from someone outside of school: employer, church leader, community member, adult mentor (Not a family member)
- Personal Essay (addressing the items listed above)
- Official High School Transcript

Birth Date:	_Grade:	School:		
Address:	City:		State:	Zip:
Phone Number:		Alternate Phone:		
Email:		Expected Gradu	ation Date:	
Signature:		Date:		
Legal Parent/Guardian Name: _				
Address:	City:		State:	Zip:
Phone Number:		Email:		

Applications due March 1, 2019