

# *Mobridge Regional Healthcare Foundation*

## **Medical Career Scholarship**

### **\$1,000**

---

#### WHO IS SELECTED?

The Foundation's goal is to award applicants who will choose to pursue a career in healthcare. Award decisions will be made solely at the discretion of the Foundation's scholarship committee, and are final. Students who are awarded the Mobridge Regional Healthcare Foundation Medical Career Scholarship will be required to sign a scholarship agreement setting forth their commitment to serve rural residents upon successful completion of their medical program.

#### ELIGIBILITY

An applicant must be either a Traditional or Non-Traditional student from the four county area (Campbell, Corson, Dewey and Walworth).

An applicant must be pursuing a healthcare career in a profession involving direct patient care within the hospital setting. Some examples of these professions include: nursing, paramedic, pharmacy, surgical technology, radiology technology, laboratory technology, respiratory therapy, occupational therapy, and physical therapy.

Applicants should inquire with the Foundation staff before they complete the application if they are unsure if requirements for eligibility are satisfied. All funds will be sent directly to the school attending and will be available second semester.

#### WHEN TO APPLY?

**Scholarship applications are available annually the first week in February and must be completed and returned to the Foundation no later than the last business day in March. Decision will be communicated to the applicant by May 1st.**

\*Applicants may reapply on an annual basis.

For more information about the Mobridge Regional Healthcare Foundation Medical Career Scholarship, call or e-mail Katie Gregg:

Phone: 605.845.8128

Email: [klgregg@primecare.org](mailto:klgregg@primecare.org)

**Mobridge Healthcare Foundation provides this annual scholarship opportunity to those pursuing their dream of service to others.**



1401 10th Avenue West • PO Box 580  
Mobridge, SD • 57601  
(605) 845-8128 • [www.mobridgehospital.org](http://www.mobridgehospital.org)

# *Mobridge Regional Healthcare Foundation*

## **Medical Career Scholarship**

### **Application**

Full Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Social Security Number \_\_\_\_\_ Have you ever been convicted of a felony? \_\_\_ Yes \_\_\_ No

If yes, explain \_\_\_\_\_

Have you applied for this scholarship previously? \_\_\_ Yes \_\_\_ No

If yes, was it under another name(s) and if so what name(s) was it? \_\_\_\_\_

What is the name of the educational facility you have been accepted to attend?

Name of program/degree \_\_\_\_\_

Date program begins \_\_\_\_\_ Will you be a full-time or part-time student? \_\_\_\_\_

Anticipated date of graduation? \_\_\_\_\_

Please include with this Application:

- A copy of the letter of acceptance into a certified healthcare program or college.
- Official copy of transcripts reflecting last two years of academic study, if study occurred within the last 5 years.
- 2 Letters of recommendation:
  - \* Professional
  - \* Personal
- A letter stating reasons for choosing the area of healthcare you are interested in as your field of study.

**APPLICATION DEADLINE MARCH 31, 2012**



Please mail application to:

Mobridge Regional Healthcare Foundation  
PO Box 580  
Mobridge, SD 57601