

Our Purpose

The CMH Foundation Scholarship Program was established to provide scholarships to assist students pursuing a healthcare career. We support students who are preparing for careers in the following areas: registered nurse, radiology, physical therapist, respiratory, occupational therapist, speech therapist, and med tech/medical lab tech.

There are three \$1,000 scholarships available. There are three scholarships who are named for individuals whose contributions to Community Memorial Hospital were substantial. These amazing individuals are:

- Rachel Hofmeister
- Betty Altman
- Stevie Boon
- The Kennerk Family Foundation

One Scholarship is reserved for a high school senior who resides in Mark, Milford, or Hicksville Township. One is reserved for a high school senior in our neighboring Ohio communities. One is reserved for a student who is currently attending college.

Eligibility & Application Process

- Applicants shall reside in Mark, Milford, or Hicksville Townships, or live within the school districts of Hicksville, Edgerton, Antwerp, or Fairview.
- Applicants shall be accepted by an accredited college or university and be accepted in a healthcare program.
- Applicants shall submit the following items to the Scholarship Committee of the CMH Foundation:
 - 1. Scholarship Application
 - 2. Two letters of recommendation. (For high school students or recent graduate, one letter shall be from a guidance counselor or high school teacher.)
 - 3. Letter of acceptance to a healthcare program.
 - 4. An essay describing why the applicant is entering into his/her chosen profession.
 - 5. Official transcript

Criteria, Deadlines, and Notification

Applicants are evaluated based on their field of study, GPA, the essay, and the letters of reference. Scholarship winners will be notified by mail or receive their award at their school awards assembly (if applicable). Winners will be asked to visit CMH for a short video on what winning the scholarship means for the student. Applications may be obtained at high school guidance offices or by calling 419-542-5690. If you have additional questions, please contact:

Carol Weidenhamer Community Memorial Hospital 208 N Columbus Street Hicksville, OH 43526 419-542-5690 csw@cmhosp.com



SCHOLARSHIP APPLICATION

Date: Click here to enter text.		
Name: Click here to enter text.		
Address: Click here to enter text.		
City: Click here to enter text.	State: Click here to enter text.	Zip: Click here to enter text.
Day Phone: Click here to enter text.	Night Phone: Click here to enter text.	
High School: Click here to enter text. Graduation Date: Click here to enter text.		
College or University: Click here to enter text. Dates Attended: Click here to enter text.		
Major: Click here to enter text.		
Resident of: Mark Tow	wnship Milford Township	pHicksville Township
 ****Please attach a one-page, single space, typed essay describing: 1. Your interest in this particular health field 2. Outlining your educational plans – be specific (ie: Nursing – RN, LPN, etc.) 		

- 3. Include complete information on starting date and anticipated completion of program
- 4. Career expectations, etc.

My signature indicates that I am aware that scholarship winners are selected on the basis of grade point average (GPA), selected field of study, and the essay. I agree that you may use my name / essay for marketing purposes if needed.

Signature of Applicant: _____

Date: _____

Please be sure to attach the following:

- Two references. (If you are in high school, please have one reference from your guidance counselor or a high school teacher.)
- Verification of admission to health care career program.
- Official Transcript
- Essay

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I am a CMH team member or a child of a CMH team member or Board Member.

RETURN TO THE CMH FOUNDATION BY MARCH 16, 2018 208 N. Columbus Street, Hicksville, OH 43526