

LIFECARE MEDICAL CENTER HEALTHCARE SCHOLARSHIP CRITERIA

LifeCare Medical Center Scholarship Fund is a scholarship offered to Roseau County students who plan to pursue a career in a healthcare related field. The Healthcare Scholarship was awarded for the first time in 2006. The intention of the fund is to encourage and promote qualified individuals from the LifeCare service area to pursue healthcare careers. Scholarships are funded by LifeCare, which is a not-for-profit organization that includes the hospital, Roseau Manor, Greenbush Manor, Home Care and Hospice, Public Health, and Rehabilitation Services.

Up to four Healthcare Scholarships will be funded each year through the sales generated from the LifeCare *Neighborhood Nook Gift and Coffee Shop* located at the Hospital. The Neighborhood Nook is staffed by community volunteers. We thank them for helping to support the funding of this Healthcare Scholarship Program.

AWARD:

- Up to four \$750.00 scholarships will be awarded.

APPLICATION DEADLINE:

- **Friday, April 16, 2021** in your Guidance Counselor's Office or mail to Lois Slick at the address listed below.

APPLICATION CRITERIA FOR ELIGIBILITY:

- You must be enrolled as a senior in high school at a Roseau County School
- You must intend to pursue post secondary education in a healthcare related field as a full time student, for the 2021-2022 academic year
- You must complete a Healthcare Scholarship Application Form
- You must attach a copy of answers to the Application Form
- You must attach a reference letter to the Application Form
- You must attach your most recent transcript to the Application Form

SELECTION AND AWARD PROCEDURE:

1. The scholarship selection will be made based on the criteria listed above by the Scholarship Committee.
2. ***Please note, if any of the above information is missing your application for the scholarship will be deemed incomplete.***
3. Announcement of the scholarship selection shall be made in a letter from the selection committee to the successful applicants.
4. **The award check will be issued to the recipient after LifeCare Medical Center has been presented with both a transcript of your first semester grades and a copy of your registration for the second semester.**
5. The award must be used in the year it is presented.

Questions regarding the scholarship or the application should be directed to:

Lois Slick, Director of Human Resources
LifeCare Medical Center
715 Delmore Drive, Roseau, MN 56751
218-463-4309, lslick@lifecaremc.com

**LIFECARE MEDICAL CENTER HEALTHCARE SCHOLARSHIP
APPLICATION FORM**

Applicant Name: _____ Birth Date: _____

Address: _____ Date: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Name of Parents or Guardians: _____

Current School of Enrollment: _____ Expected Graduation Date: _____

Are you currently or have you been an employee or volunteer of LifeCare? _____

Please type narrative answers to the following questions on a separate sheet of paper and attach to this application form.

1. What post-secondary educational school do you plan to attend? Have you been accepted?
2. What type of health care career have you chosen to pursue?
3. Why have you targeted healthcare as a career track?
4. Have you ever worked, volunteered or had personal experience in a health related field? Explain how this has impacted your life and your decision to pursue a health related career?
5. What extra curricular or community activities have you been involved in?
6. Other comments?

Please check the lines below for items included with this application:

____ Letter of recommendation from a teacher or member of the community who is not a family member.

____ This letter should point out personal attributes that make you a good candidate for this scholarship.

____ A separate sheet with your narrative to the above questions.

____ Attach a copy of your current high school transcript.

If I am selected, I give LifeCare permission to publicize award information and photos for marketing purposes.

I understand that I must provide LifeCare Medical Center with proof of attendance and successful completion of the first semester of post secondary education and enrollment in a second semester, before the scholarship will be distributed.

Signature of Applicant

Date