

## Floyd Valley Auxiliary Guidelines for Selection of Scholarship Candidate

### Application Form

1. Applicant must be a resident of the Floyd Valley Healthcare service area. This would include Gehlen/ Spalding Catholic, LeMars Community, Remsen St. Mary's, MMCRU, Akron- Westfield, Hinton and Kingsley-Pierson school districts.
2. Letters of recommendation must accompany application. These should be from school (former teacher or administrator), business person, or employer (either former or present), and a person familiar with applicant's character. These letters should not be from a relative. This will demonstrate moral character.
3. Scholarship will be available to a high school graduate or an adult returning to school. Can also be a graduate currently enrolled in school of choice. May apply more than one year.
4. Personal interviews may be requested for further clarification of applicant's application and character.
5. **Applications must be received by April 3, 2023.**
6. Applications are available at schools (listed above), [floydvalley.org/volunteers/auxiliary](http://floydvalley.org/volunteers/auxiliary) and the [Auxiliary Gift Shop](#).
7. A transcript should accompany the application.
8. Scholarship Committee will select suitable candidates and the Auxiliary Board will approve the selections at their **May 3, 2023** meeting.
10. Applications should be returned to Diane Dreckman, 1126 3<sup>rd</sup> Street SE Le Mars, Iowa 51031.

### Award

1. The student selected will be notified by phone and/or letter following the **May 3, 2023** Auxiliary Board meeting. ***Payment will then be made directly to the school the student is attending for tuition purposes only for the following academic year (2023-2024) upon proof of registration.***
2. A Floyd Valley Auxiliary will be announcing the scholarships during National Hospital Week **May 7-18, 2023** via press release and personal phone call to winners. A photo will be requested of recipients, if possible, for publicity purposes.

# Floyd Valley Auxiliary Scholarship

## APPLICATION FORM

Two **\$2,000.00** college scholarships for TUITION purposes ONLY, are available to students or adults attending an accredited school leading to a health related career. Both scholarships will be to residents of FVH service area.

### Qualifications:

1. Must be pursuing a health related career (pre-med, nursing, therapy, technologists, med records, dental health)
2. Must be a current resident of the Floyd Valley Healthcare service area.
3. Must be accepted by an accredited school of your choice.
4. Personal interviews may be requested.
5. **Applications must be received by April 3, 2023.**

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Name \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian/Spouse \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ City, State Zip \_\_\_\_\_ County \_\_\_\_\_  
Email Address \_\_\_\_\_

Name of School Now Attending \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Name of School Accepted By \_\_\_\_\_

Health Occupation Career you Plan to Pursue \_\_\_\_\_

Length of course applying for \_\_\_\_\_ Average Semester Cost \_\_\_\_\_

Have you received any financial aid this year or in past years? If yes, please state from whom and the amount.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please write a brief statement of why you're seeking this scholarship; include future plans.

\_\_\_\_\_  
\_\_\_\_\_  
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Discuss how Floyd Valley Healthcare has benefited you and your family:

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Please list any extra-curricular activities and any jobs held:

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The above information is correct and accurately stated

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* \* \* \* \*

Application must include the following to be eligible:

**1. Letters of reference from:**

- a. School (former teacher or administrator)
- b. Business person or past/present employer
- c. A person familiar with your character -- NOT a relative.

**2. A copy of your transcript.**

\* \* \* \* \*

Upon completion, return scholarship application and all necessary attachments by **APRIL 3, 2023** to:

**Diane Dreckman**  
**Auxiliary Scholarship Co-Chair**  
**1126 3<sup>rd</sup> Street SE**  
**Le Mars, Iowa 51031.**