



SCHOLARSHIP APPLICATION
All application materials are due June 26, 2009

Please select the scholarship(s) you are interested in applying for:

○ **Rita M. Ahart Scholarship \$400**

This scholarship is awarded to a person enrolled in a bachelor or associate's program at an accredited nursing school and possessing apparent skills in leadership. Candidates should discuss leadership skills in essays and through references.

○ **Antoinette Dorothy Berkel Scholarship \$3000**

This scholarship is available to nursing students who demonstrate excellent academic performance and who fit the description of a caring person actively involved in community service. Application must include the student's family's prior year tax return as well as a letter of nomination from a high school teacher, college professor, pastor or principal.

○ **Helen Chop Nursing Scholarship \$400**

This scholarship is awarded to a person enrolled in a Bachelor's degree nursing program, and residing in one of the following counties: Douglas, Johnson, Leavenworth or Miami County in Kansas, or Clay or Jackson County in Missouri. This scholarship is based upon the applicant's demonstration of Christian values, involvement in community service, financial need and willingness to work at Providence Medical Center or Saint John Hospital following graduation. Candidates must provide documentation of community service activities.

○ **Elizabeth Cavaner Memorial Nursing Scholarship \$300**

This scholarship was established by Mr. C.G. Cavener after his wife, Elizabeth, was cared for at Saint John Hospital. Originally intended for students who had served as candy strippers at the hospital, the award is now intended for a student entering a nursing career or other health related profession. Preference will be given to students who have volunteered at Saint John Hospital in Leavenworth.

○ **Edward F. and Marian Reilly Health Professional Scholarship \$1,000**

The scholarship is available to a graduating high school senior or any person who has graduated and is interested in pursuing a health related educational program. The student must live or attend school in Leavenworth County. The scholarship is awarded on the basis of the applicant's motivation for a health career and financial need.

○ **Eileen Welch Memorial Nursing Scholarship \$1,000**

The scholarship is awarded to a student of non-traditional age who is currently enrolled in either an associate or bachelor's degree nursing program. The scholarship is awarded from a memorial gift designated to the Providence Saint John Foundation by the Welch family in memory of Eileen Welch. Welch was a former nurse at Saint John Hospital and an active Guild member for many years.

○ **Providence Saint John Foundation Healthcare Scholarship \$2500**

This scholarship is awarded to a student who college school in Kansas or Missouri, and who is pursuing education in a healthcare field. Priority will be given to students who demonstrate a history of community service and academic achievement, as well as students who document financial need through prior year's tax return.

Applicant's name _____
Last First Middle

Home address _____
Street City State Zip

Telephone (_____) _____ Email _____

Date of birth _____ Married _____ Single _____

High School _____ Years Completed _____

Address _____
Street City State Zip

College _____ Years Completed _____

Address _____
Street City State Zip

List below the two persons who will, **at your request**, forward directly to the Providence Saint John Foundation a letter of reference in support of your scholarship application:

1. _____
Name Relationship

2. _____
Name Relationship

PLEASE INCLUDE YOUR MOST RECENT TRANSCRIPT WITH YOUR APPLICATION

FAMILY INFORMATION (If applicable)

Father: _____
Name Address

Occupation

Mother: _____
Name Address

Occupation

Estimate your expenses (state number of months/years covered by estimates):

Tuition and fees	_____
Books, instructional equipment and materials	_____
Room & Board	_____
Uniforms	_____
Lunches, travel expenses for students who commute	_____
Other costs (specify)	_____
Total	_____

Costs are for _____ months/years

What other scholarships have you applied for? _____

College or university you are planning to attend _____

Date of enrollment _____

Please write a 1-2 page essay on a separate piece of paper describing your qualifications for the scholarship(s) for which you are applying. Include characteristics such as your motivation for a nursing career, financial need, participation in extra-curricular or community service activities, etc.

Signature of applicant _____

Date

YOUR APPLICATION IS NOT COMPLETE AND CANNOT BE CONSIDERED UNTIL:

- This application is completed and returned to the Providence Saint John Foundation
- Three reference letters have been received
- A tax return from the previous year has been received (for any scholarships dependent upon financial need)
- Your most recent transcript has been received
- Your qualification essay has been received

The award of this scholarship will not be final until you have been accepted by an accredited school.

Please submit to: **Providence Saint John Foundation**
Attention: Becca Jones
8929 Parallel Parkway
Kansas City, KS 66112

For additional information, please call (913) 596-5110 or e-mail becca.jones@providence-health.org.

This application may be duplicated.