



Select the scholarship(s) you are interested in applying for. Please submit only one (1) application regardless of the number of scholarship for which you are applying.

○ **Antoinette Dorothy Berkel Scholarship \$2,500**

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.

○ **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.

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

This scholarship was established by Mr. C.G. Cavaner 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.

○ **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.

○ **Helen Crilly Nursing Scholarship \$1000**

This scholarship is awarded to a person seeking an Associate or Bachelor's degree in nursing. This scholarship is based upon the applicant's grade point average, demonstration of Christian values, community service involvement and financial need.

○ **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.

○ **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.

Name _____
Last First Middle

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

FAMILY INFORMATION (If applicant is still dependant)

Father: _____
Name Address

Occupation

Mother: _____
Name Address

List persons other than the applicant who are dependent on income of applicant's parents:

<u>Name</u>	<u>Age</u>	<u>Relationship to applicant</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Spouse (if applicable) _____

Address _____
Street City State Zip

Occupation _____

Describe below any other pertinent information concerning the financial assets and obligations of your family that would be helpful in assessing your financial need for a scholarship:

Estimate your annual expenses.

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

What other financial aid have you applied for? _____

College or university you are planning to attend _____

Date of enrollment _____

Signature of applicant _____

Date

Your application is not complete without the following materials, compiled and submitted *in the order listed below*. Please do not include any extra supplemental materials:

- This completed application
- A 1-2 page essay describing your qualifications for the scholarship(s) for which you are applying
- 2-3 letters from unrelated references with whom you have a professional or academic relationship, in envelopes with reference signature over the seal
- Your most recent official transcript
- A tax return from the previous year (only for scholarships dependent upon financial need)

Submit packet to: **Providence Saint John Foundation**
Attention: Karla Kimerer
8929 Parallel Parkway
Kansas City, KS 66112

For additional information, please call (913) 596-4151 or e-mail providence.foundation@providence-health.org

This application may be duplicated.