

Good Shepherd Medical Center Auxiliary **SCHOLARSHIPS**

QUALIFICATIONS:

1. Completion of at least one successful year of study in the field of medicine at a college or university.
2. Home residence must be within the area served by Good Shepherd Health Care System. The area consists of Boardman, Irrigon, Umatilla, Hermiston, Stanfield, and Echo.
3. College transcripts must accompany the completed application.
4. Five (5) scholarships at \$2,000 each will be awarded contingent upon acceptance into a medical program.

Applications are available at the Good Shepherd Medical Center Gift Shop or by contacting the Director of Volunteer Services at 541-667-3690 or cschaan@gshealth.org.

Completed application must be delivered to the Gift Shop or mailed to the Scholarship Committee by **Thursday, April 30, 2020**.

Final scholarship award determination is at the sole discretion of the Auxiliary.

Good Shepherd Medical Center
ATTN: Auxiliary Scholarship Committee
610 NW 11th St.
Hermiston, OR 97838

**GOOD SHEPHERD MEDICAL CENTER AUXILIARY
SCHOLARSHIP APPLICATION**

QUALIFICATIONS:

1. Completion of at least one successful year of study in the field of medicine at a college or university.
2. Home residence must be within the areas served by Good Shepherd Health Care System. The area consists of Boardman, Irrigon, Umatilla, Hermiston, Stanfield, and Echo.
3. College transcripts must accompany the completed application.
4. Include a short description about yourself and why you feel you should be considered for this scholarship. Include a photo for publicity if chosen as a recipient.
5. Include a letter of recommendation from an instructor/work supervisor.
6. Five (5) scholarships at \$2,000 each will be awarded contingent upon acceptance into a medical program.
7. Completed application must be mailed to the Auxiliary Scholarship Committee or dropped off at the Gift Shop by **Thursday, April 30, 2020**.
8. Final scholarship award determination is at the sole discretion of the Auxiliary.

***** **PERSONAL** *****

Name _____ Date _____

Mailing Address _____ Phone _____

City, State, Zip Code _____

***** **EDUCATION RECORD** *****

Name and location of High School _____

_____ Date Graduated _____

Name and location of schools attended after High School

Current field of study _____

Name and location _____

***** **REFERENCES** *****

Give name and phone number of two references, one professional and one personal not related to you.

1. _____

2. _____

Hospital Auxiliary Offering Scholarships

The Good Shepherd Medical Center Auxiliary is now accepting applications for \$2,000 college scholarships for the 2020-2021 school year.

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- * Completion of at least one successful year of study in the medical field at a college or university.
- * Home residence must be within the areas served by Good Shepherd Health Care System. This area consists of Boardman, Irrigon, Umatilla, Hermiston, Stanfield, and Echo.
- * College transcripts must accompany the completed application.
- * Scholarships will be awarded contingent upon acceptance into a medical program.

Applications are available at the Good Shepherd Medical Center Gift Shop or by contacting the Director of Volunteer Services at 541-667-3690 or cschaan@gshealth.org.

Applications must be returned by **Thursday, April 30, 2020** to the Hospital Gift Shop or mailed to:

Good Shepherd Medical Center
ATTN: Auxiliary Scholarship Committee
610 NW 11th St.
Hermiston, OR 97838.