



Scholarship Guidelines

Purpose

The scholarship's purpose is to encourage students with an interest in healthcare to pursue a career in healthcare or other related fields of study.

Award

Three non-renewable scholarships in the amount of \$500.00 each will be awarded to the students deemed most deserving. A check will be issued to the student's college or university to apply towards tuition, books, or room and board. Entrant applications will be based on merit, not financial need.

Requirements

- Be a U.S. citizen
- Currently a senior at a high school within a 30-mile radius of Dubuque OR located in Manchester, IA OR Richland Center, WI.
- GPA of 3.0 or greater

Process

All applications will be reviewed by the Grand River Medical Group scholarship committee. The recipients will be chosen based on academics, extra-curricular activities, and short essay. In the case of a tie, the finalists will be interviewed by the scholarship committee.

Deadline

All applications must be received by noon on Friday, April 1

Notification

The recipients will be announced and awarded at High School Awards banquet (if applicable) and via Grand River Medical Group's social media platforms, newsletter, and other marketing as deemed appropriate.

Questions?

Contact: Kelly Goldsmith, Marketing Coordinator and Project Specialist

Submissions

Mail application to:

Attn: Scholarship Committee
Grand River Medical Group
1515 Delhi Street
Dubuque, Iowa 52001
kgoldsmith@gr-mg.com
(563) 557-3910

Enclosures for complete application:

- Application
- Unofficial transcript
- Essay
- Resume (if applicable)



GRAND RIVER MEDICAL GROUP SCHOLARSHIP APPLICATION

Please type or print legibly: Date: _____

Last Name: _____ First Name: _____ MI: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Cell Phone: _____ E-mail: _____

US Citizen? _____ High School: _____

Graduation Year: _____ Grade Point Average: _____

High School Address: _____ School Counselor: _____

Honors/AP/College- level courses you have taken: _____

Extracurricular Activities/Memberships/Community Service: _____

Work Experience*

Table with 3 columns: Dates (From/To), Employer, Position/Description

*A resume is sufficient and appreciated, if available.

Essay

Attach a typed, double-spaced, 500-to-1,000-word essay addressing the following questions:

- Share an experience that has shaped your desire to pursue a career in healthcare.
• What motivates you to achieve your goals?
• What impact would this scholarship have on your education and career goals?

I have read the scholarship guidelines, completed the above scholarship application with attachments and certify that I qualify for scholarship award consideration.

Signature _____ Date _____



For GRMG Scholarship Committee Use Only

Received by GRMG Scholarship Committee:

Committee Member

Date

Reviewed by GRMG Scholarship Committee:

Committee Member

Date

Committee Member

Date