

The Family Health and Wellness Foundation is pleased to announce that it will be making three scholarships available between **\$3,000 to \$5,000** to recipients pursuing an education in the healthcare field for the 2019-20 academic year.

The key considerations for this scholarship are: academic accomplishment, financial need, involvement in the community, and desire to work in the healthcare field.

Eligibility requirements are as follows:

- 1) Applicant must be accepted at an accredited college or university during the academic year 2019-20 to pursue a career in the field of medical healthcare. Please note, unfortunately, chiropractic and orthodontia students are not eligible for these scholarships.
- 2) Applicant must complete an application and submit essays of 300 words or less each.
- 3) Applicant must submit one letter of recommendation (from someone not living with you).
- 4) Applicant must submit a current **copy** of their transcripts (or last date attended).
- 5) Applicant must currently have a minimum of a 3.0 cumulative GPA (as of the last year attended).
- 6) **Applications must be post marked (PO Box 6813, Kennewick, WA 99336), or e-mailed to ken.daniel@fh-wf.org no later than February 28, 2019.**

There will be no extensions or exceptions to the deadline.
Documents received after that date will not be accepted.

Upon selection or before funds are released to the school:

- A copy of the acceptance letter will be required.
- A copy of the student's schedule with college student ID number will be required.
- Proof of eligibility to work in the U.S. will be required upon selection.

Applications are available at the Family Health and Wellness Foundation's website www.fh-wf.org

An independent selection committee, administered by the Family Health and Wellness Foundation, will select the scholarship recipients. Notification calls will be made to the winners by the middle of March 2019. Award of the scholarships will take place at the Foundation's Annual Meeting in May.

Recipients will be asked to offer a few brief comments on stage at the event about their goals and achievements.

**Family Health and Wellness Foundation
Scholarship Application**
Academic Year 2019-20

Full Name: _____

Mailing Address: _____

Phone number: _____ Email: _____

Cumulative GPA: _____ Student ID#: _____

Eligible for work in the U.S.? YES NO

School Presently Attending: _____

Are you pursuing education in the field of Nursing? YES NO

Are you pursuing education in the Healthcare Field? YES NO

If so, what is your planned field of study in medical healthcare? _____

Please list community and school activities, awards, and honors received: _____

School planning to attend in Academic Year 2019-2020:

Extra-Curricular activities: _____

Community / Civic Activities (include # of unpaid hours worked): _____

If employed, what type of work do you perform and how many hours on average do you work per week: _____
