

**Silverton Hospital Auxiliary
Medical Career Scholarship Application**

January 14, 2010

Dear Applicant:

The **Silverton Hospital Auxiliary** offers scholarships to qualified students who have chosen a medically related career that could be practiced at Silverton Hospital. To qualify for these scholarships the applicant must:

- Be a student, preparing for a medical career at an accredited institution of higher education or have been accepted for fall admission by a college or university.
- Furnish a **transcript** of grades from high school or college.
- Furnish a **written recommendation** from the applicant's high school or college advisor (teacher's or professor's letter will be accepted.)
- Furnish a **written recommendation** from an individual who knows the applicant through his/her extra-curricular activities. Employer, coach (music, speech, sports), volunteer coordinator are acceptable.
- **Complete the attached application.**
- **Write a one-page essay** explaining your reasons for choosing your particular medical career.
- **Answer the enclosed questions on a separate piece of paper.**

Application and all supporting documents must be in the scholarship chairman's hands by 5 p.m. on March 19, 2010. Scholarship recipients will be notified by mail. Thank you.

Silverton Hospital Auxiliary
Scholarship Committee Chairman
Beverly Ferguson
503.873.2287

**Silverton Hospital Auxiliary
Medical Career Scholarship Application**

Name: _____

Parents or Guardians: _____

Home Address (mailing): _____

College Address (if applicable): _____

Home Phone Number: _____ College Phone Number: _____

Medical field I plan on entering: _____

High School classes I have taken which will help me attain my goal: _____

College I am or will be attending: _____

High School cumulative GPA: _____ College: _____

Past and Present
Employment: _____

School Activities: _____

Community Activities: _____

Estimated Annual Expense: _____

Have you ever received a scholarship from the Silverton Hospital Auxiliary? _____

Name of your primary care physician: _____

Please return to:
Silverton Hospital Auxiliary c/o Scholarship Committee PO Box 573 Silverton, OR 97381

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Please answer the following questions:

1. Who has made an impact on your life and why are you grateful, or not?
2. Name one positive and one challenging aspect of this career.
3. What schools did you consider? Why did you choose the one you did?
4. How do you plan to pay for your education?
5. In your schooling thus far, what class has surprised you?
6. Best made plans go awry. What is your plan B?