

Syracuse Area Health Auxiliary Scholarship

The Syracuse Area Health Auxiliary Scholarship will be awarded to one graduating senior majoring in a medical related field. The scholarship amount will be \$2,000 and will be sent to the educational institution after acceptance into their medical field of study. Upon acceptance it is **the students' responsibility** to send a copy of their acceptance, stating the field of study to SAH at the address below. The money will be awarded at that time. If the student changes their planned field of study the scholarship will be awarded only if the new course of study is in a field related to medicine by the judgment of the SAH Auxiliary. The scholarship must be redeemed within 6 years of date awarded.

This scholarship is open to all graduating seniors attending Syracuse or Palmyra High School or who reside in the Syracuse Area Health district at the time of application even if their school is outside the hospital district.

The application must be **postmarked by April 1**, the year of the application and sent to:

Syracuse Area Health
Attn: Aux. Scholarship Committee
P.O. Box N
Syracuse, NE 68446

Application Requirements

The applicant must:

- 1) be a graduating senior
- 2) attend Syracuse or Palmyra High School **OR** live in the Syracuse Area Health district*
- 3) be entering a medical field of study
- 4) provide high school transcript
- 5) provide resume with school and community activities
- 6) fill out the application form completely including essay and sign

*Syracuse Area Health District is all property within Otoe county located west of 40th Road. Otoe county residents east of County Road 40 are not in the hospital district.

Syracuse Area Health Auxiliary Scholarship Application

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

My parents/guardians reside in the SAH Hospital district: Yes No

All property within Otoe County located west of 40th Road (includes all property on the west side of 40th road)

If the answer to the above question is no, do you attend Syracuse or Palmyra High School?

Yes No

What is your planned field of study?

What college do you plan to attend? _____

Have you been accepted? _____

How will you finance your education?

Please attach:

1. Essay question - In 500 words or less please explain why you have decided to enter this medical field of study and how you hope to use your degree.
2. High School transcript
3. Resume

Applicant Signature

Parent/Guardian Signature

Date