

# Tomah Health Community Foundation Scholarship Application

Thank you for your interest in a scholarship offered through Tomah Health. Please fill out this selection form

**Directions:**

1. Fill in Part I General Applicant Information
2. Attach documents needed such as essay, transcripts and reference letters. See guideline sheets for documents needed.
3. Mail to:       Tomah Health  
                  C/O Tomah Health Marketing  
                  501 Gopher Drive  
                  Tomah, WI 54660

## Part I General Applicant Information

Applicant's First	Middle Initial	Last Name	Birthdate	Intentionally Blank
Address Street			Telephone Number	
City		State	Zip	
Telephone Number at school (if applicable)			Graduation Date:	
High School Attended:			Projected Graduation Date:	
College or Technical School you plan to attend or are currently attending:			Minor (if applicable)	
Major:				

## **TOMAH HEALTH COMMUNITY FOUNDATION SCHOLARSHIP GUIDELINES**

- The scholarship is funded by the Tomah Health Community Foundation.
- Three \$1,500 scholarships will be awarded each year based upon available funds.
- The scholarship is not awarded on the basis of individual need, but rather on an individual's ability to complete an educational program to become a professional in the health care field.
- The recipients will be chosen based upon their application, grades, letters of reference and their goals in selecting the health care field.
- There is no limit on how many times an applicant can win the scholarship; however, first-time applicants will be given first consideration.
- **Applications received by March 15** of each year will be considered for award that year at the Tomah High School Annual Awards Program.

### **APPLICATION REQUIREMENTS**

1. The scholarship application is available to all high school seniors in the Tomah Area School District or past Tomah Area School District graduates pursuing a career in the health care field.
2. Copy of most recent transcript of grades.
3. Three (3) letters of reference (from non-relative).
4. Letter from applicant indicating the reasons for selecting the health care field. Please also include extra curricular activities and community/civic involvement. (All materials should be paper clipped. No staples, please)
5. Scholarship funds are distributed upon receipt of successful completion of the first semester of college/technical college. Successful completion is defined as having at least a 2.5 (C+) grade point average.

#### **Mail applications to:**

**Tomah Health  
C/O TH Marketing  
501 Gopher Drive  
Tomah, WI 54660**

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Revised 05/2019