



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

High School: \_\_\_\_\_

Parents' names: \_\_\_\_\_

Class rank: \_\_\_\_\_ GPA: \_\_\_\_\_

School activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community Involvement / Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special awards or honors you have received: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Discuss your future plans to pursue a healthcare education and career and why you deserve this scholarship (200 words or less): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please return your completed scholarship application, along with a letter of recommendation from a teacher or school counselor, to:

Jones Regional Medical Center Foundation 1795 Hwy 64 E Anamosa, IA 52205

Deadline is Friday, March 31, 2023. Thank you.

\*\* Awardees will receive a \$500.00 scholarship made out to the school of their choice after submission of required documents to JRMC. Instructions will be provided when award is announced.