

**This scholarship is for spring 2021 and fall 2021 funding. Deadline for all applications is January 31, 2021. High school seniors and non-traditional students are encouraged to apply. High school students will only be eligible for fall funding.**

**To apply for a scholarship with the Bartlesville Community Foundation, please:**

- Complete the BCF Scholarship Application Form accompanying each scholarship
- Provide any scholarship-specific addendums to the application form
- Include a copy of your submitted FAFSA application
  - FAFSA means **full FAFSA** with **all** pages. This is not just the cover letter stating whether or not you are eligible for financial aid but the full 10 page report.
- Please follow submission guidelines:
  - No staples
  - Printed single sided if possible
  - Do not fold application documents
  - Please submit individual applications and scholarship-specific addendums attached in separate envelopes or folders, paper clipped or binder clipped
    - For example, if applying for multiple scholarships, put each scholarship and specific addendums in the same envelope/folder and the second in another envelope/folder.
  - Do not provide attachments that are not requested by the scholarship
    - For example, if applying for a scholarship that DOES NOT request a resume DO NOT include a resume. It will not be reviewed.

Where applicable, “service to school” is defined as involvement in school activities, such as clubs, service organizations, school government, pep squad, athletics, etc.

**Applications should be mailed, delivered or dropped in lock box at:**

**Bartlesville Community Foundation Scholarships, 208 E 4<sup>th</sup> St Bartlesville, OK 74003**

Applications must be completed by the student.

Scholarship recipients will be required to complete and return a scholarship acceptance form providing necessary information about their school of choice prior to grants being paid.

Award recipients will either be recognized at their high school awards assembly or be notified directly by Bartlesville Community Foundation . Please direct any questions to Bartlesville Community Foundation at 918-337-2287



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## Jane Phillips Medical Center Auxiliary Scholarship

To be considered for a scholarship the applicant must be accepted in a medical or health care program in an accredited institution.

**Amount Available:** The scholarship amount is limited by available funds. Anticipated award is \$2,000 awarded as \$1,000 per semester per student to qualifying applicants majoring in a medical field of study. Verification of grades and enrollment must be provided to the Bartlesville Community Foundation prior to payment of second semester scholarship. Details on due dates will be provided in a scholarship acceptance letter upon receipt of an award.

**Eligibility Criteria:** The applicant must be a graduating senior attending an accredited high school, or attending college or university with plans to major in a medical or health care field. College and University students as well as non-traditional students returning to school may also apply.

Students returning to school must provide a copy of their most recent transcript reflecting graduation from high school and/or community college, or university if applicable.

**Required Addendum:** Two letters of recommendation from someone unrelated to the applicant are required.

An application will be denied if the information is not complete or if there is falsification or misrepresentation of information on the application. A scholarship may be revoked if the application is found to be falsified after an award has been granted.



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### SCHOLARSHIP APPLICATION FORM 2020

Please clearly complete the applications below in typed or handwritten in pen. Any application that is not legible will not be considered. If additional space is necessary to answer required questions, please add additional typed pages and clearly state which question is being answered.

SCHOLARSHIP NAME: Jane Phillips Medical Center Auxiliary Scholarship

**New or Renewal Applicant** (please circle one)

STUDENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street/mailling address City State Zip

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_ CHILDREN IN HOME? (#): \_\_\_\_\_

PLACE OF EMPLOYEMENT: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

PLEASE ANSWER THE FOLLOWING QUESTIONS ON THIS APPLICATION FORM. ANSWERS MAY BE TYPED OR LEGIBLY HANDWRITTEN. IF YOU MUST EXTEND YOUR ANSWERS PAST THE GIVEN SPACE, PLEASE CONTINUE YOUR ANSWER ON A SEPARATE PIECE OF PAPER IN THE SAME FORMAT AS GIVEN IN THE APPLICTION. NO RESUMES OR OTHER LAYOUTS MAY BE USED TO ANSWER THE APPLICATION QUESTIONS. THANK YOU.

HAVE YOU EVER WORKED AS AN **EMPLOYEE** OR **VOLUNTEER** FOR JANE PHILLIPS MEDICAL CENTER? (Circle one)

DO YOU HAVE A RELATIVE WORKING AT JANE PHILLIPS MEDICAL CENTER? YES NO

IF SO WHO, AND WHAT IS THE RELATIONSHIP: \_\_\_\_\_

DO YOU POSSESS ANY LICENSE OR CERTIFICATIONS IN THE HEALTH CARE FIELD? IF SO, PLEASE LIST:

\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER HAD A LICENSE REVOKED OR SUSPENDED? YES NO



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HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE OTHER THAN A TRAFFIC VIOLATION? YES NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

LIST MEDICAL OCCUPATIONAL EXPERIENCE (NURSE AID, WARD CLERK, ETC.) \_\_\_\_\_

WHAT ARE YOUR FUTURE PLANS AS A PROFESSIONAL IN THE MEDICAL FIELD?

EXPLAIN IN 25 WORDS OR LESS WHY YOU ARE APPLYING FOR THIS SCHOLARSHIP:

PLEASE LIST AWARDS, HONORS, SCHOOL CLUBS (including office served, if applicable), & EXTRACURRICULAR ACTIVITIES:

PLEASE PROVIDE YOUR EMPLOYMENT HISTORY:



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ARE YOU RELATED TO BARTLESVILLE COMMUNITY FOUNDATION EMPLOYEE, BOARD OR COMMITTEE MEMBER?

Yes  No. If yes, what is the relationship? \_\_\_\_\_

\_\_\_\_\_  
Signature of student applicant

\_\_\_\_\_  
Date

By signing, you acknowledge that all information is true and correct, to the best of your knowledge, and that you, the student, completed the application and any required addendum/essay. The applicant should understand that the intent of collecting and maintaining this data on individuals is for determining eligibility of the applicant, specifically, term grades and transcripts by Bartlesville Community Foundation and the scholarship committee