

Ka'u Rural Health Community Association, Inc.

Mission: *"Doing Whatever It Takes To Keep Ka'u Healthy"*

The Ka'u Rural Health Community Association recognizes the growing challenge of supporting motivated students wanting to attain a higher education in the healthcare industry. *KRHCAI's* Nursing Scholarship Program is offering **(2) Two Awards** for 2015 Summer Semester. The program was established from generous individuals, businesses and organizations dedicated in providing educational opportunities that are available to students residing in the Ka'u District and meet the criterias for financial assistance.

Interested applicants may submit their application and requested documents by mail postmarked by **March 2, 2015** to:

KRHCAI
% Scholarship Committee
P.O. Box 878
Pahala, HI 96777

The Ka'u Resource and Distance Learning Center is open on **Mon. - Fri. from 8:00 a.m. - 4:30 p.m.**. We ***do not*** mail any applications to interested applicants. Please call **808-928-0101** to pick up and drop your forms.

Award amount: (1) One Nursing Scholarship of **\$500.00** per applicant for tuition, room & board, and/or other related educational expenses.

Requirements:

- **KRHCAI Nursing Scholarship** application must be completely answered, turned in with each requested documents.
- A resident in the Ka'u District (Supporting Document with Current Mailing Address).
- Major in health-related field, taking pre-requisites to be admitted in healthcare educational program or a high school student enrolled to study in a healthcare program (Nurses' Aide, Medical Assistant, License Practical Nursing (LPN), Associate Degree in Nursing (ADN), and Bachelor in Science of Nursing (BSN). Submit a copy of acceptance letter in the program.
- Minimum GPA **2.5**. Submit a copy of an original transcript (marked or stamped with a school emblem).
- Demonstrate financial need.
- Enrolled as a full-time student in an accredited community college or university as either an undergraduate or graduate student (12 course credits or more).
- Be active in extracurricular activities and community service. Special attention will be noted for volunteer work connected with the activities of KRHCAI.
- Submit a minimum of one page single-spaced, type written academic goal statement or essay.
- Two letters of recommendation required. These letters of recommendations should come from previous or current employers, teachers', physicians' and community leader's **not associated** with KRHCAI
- **Must be available for an interview.**
- If applicant is awarded, recipient will commit to 50 hours of volunteer community services for KRHCAI.

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KRHCAI Nursing Scholarship Application

Date: _____

Legal Name: _____
Last Name First Name M.I.

Permanent Residence: _____
Number, Street, and Apartment Number City State Zip

Mailing Address: _____
City State Zip

Home Telephone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____

School Address (plan to attend): _____
Number, Street, and Apartment Number
City State Zip

Date of Birth: _____ Age: _____ Marital Status: _____

Any Children and Ages? _____

(Check one) I am a U.S. citizen U.S. national Resident Alien from Country _____

Attending Semester (check one) Fall Year _____ Spring Year _____ Summer Year _____

Study of Interest: _____

Cumulative GPA: _____

Number of College Credits earned (if any): _____

Expected Date of Graduation: _____

Degree or Certificate you will receive: _____

I agree that all information contained on this application is true to the best of my knowledge. Ka'u Rural Health Community Association, Inc., its Scholarship Committee Members, Scholarship Review Board and Board of Directors reserves their right to award an applicant according to the requirements stated. Any false, inaccurate or incomplete information will disqualify me for (One) fiscal year from the time this application is dated. _____ (initial here)

Print and Sign your name _____ Date: _____

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Name of Applicant: _____

1. List the school from which you graduated, and all higher education institutions attended. Include summer, study-abroad, exchange programs.

College: Name of School	Location or Address	Dates Attended
High School: Name of School	Location and Address	Dates Attended
Elementary Schools	Location and Address	Date Attended

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2. List college or/and high school activities (student government, sports, publications, school-sponsored or community service programs, student-faculty committees, arts, music, etc.). List in descending order of significance.

Activity	Dates	School

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3. List public service and/or community activities (homeless services, environmental protection/conservation, advocacy activities, work with religious organizations, etc.). Do not repeat items listed previously. List in descending order of significance.

Activity	Dates	Role

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4. List part-time and full-time jobs and nongovernment internships since high school graduation or during high school.

Type of Work	Employer and Address	Dates of Employment	Average # of Hours / Week

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5. List awards, scholarships, publications or special recognitions you have received. List in descending order of significance

Name of Award	From: Name of Organization	Dates Received or Given

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6. Academic goal statement or essay that includes the following (minimum of one page single-space):

1. *Why do you deserve to be awarded the KRHCAI Scholarship?*
2. *Why do you want to work in the healthcare career field?*
3. *A personal statement on the significance of community service.*
4. *Demonstrate a commitment to our community in Ka'u.*

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