

Essay

Please provide a typed essay about what experiences have influenced your decision to pursue a career in your course of study. (Essay not to exceed two, double-spaced, typed pages)

Application Deadline: April 16, 2012

For more information, please call the Foundation Office at 362-0159.

Important Information

All applicants will receive notification of awards no later than the end of May.

I UNDERSTAND THAT SUBMISSION OF THIS APPLICATION AUTHORIZES THE SCHOLARSHIP COMMITTEE TO OBTAIN VERIFICATION OF AUTHENTICITY OF THE TRANSCRIPTS I HAVE PROVIDED. I HEREBY AUTHORIZE RELEASE OF ALL THE FOREGOING SCHOLARSHIP INFORMATION AND/OR MATERIALS. I ALSO GIVE PERMISSION TO RELEASE MY NAME TO THE SPONSORS, NEWSPAPERS AND OTHER MEDIA SPONSORS FOR PUBLICITY.

Application Signature

Date

Associate/ Volunteer Signature

Date

**Please mail completed application to:
St. Joseph Health System Foundation, 220 Beech St./P.O. Box 659, Tawas City, MI 48764**