

First Care Health Center Scholarship Application

Up to four \$500 scholarships will be awarded to area graduating high school seniors who plan on continuing their education at an accredited 2-year or 4-year college/ university or vocational/technical school with the intention of pursuing a career in a health-related field.

Applications can be downloaded, completed, and submitted online at www.firstcarehc.com/scholarships.

Eligibility

Each applicant must:

- Be a graduating high school senior in 2023.
- Be accepted by an accredited two- or four-year college, university, or vocational-technical school.
- Have at least a C grade point average (GPA).

Application Instructions

- Type (preferred) or write a 500-700 word essay to the question: “What field or major do you intend on studying and how does it impact rural health in your community?”
- Electronically submit your essay and cover sheet at www.firstcarehc.com/scholarships.
- Alternatively, applications can be mailed to:
First Care Health Center
Attn: Scholarship Committee
PO Box 1
Park River, ND 58270
- **Submissions must be received by 11:59PM CST on March 31, 2023.**
- Recipients will be announced on Thursday, April 13, 2023.

Terms & Conditions

- Scholarships will be awarded on a one-time basis.
- Scholarships are not renewable.
- Scholarships will be awarded without regard to race, ethnicity, national origin, religion, gender, or disability.
- Incomplete applications will not be considered.
- Awards will be paid upon proof of registration at an institute of higher education and will be issued in June of 2023.
- By submission of this application, you certify all of the information provided is complete and accurate to the best of your knowledge.
- You grant permission to First Care Health Center to use your name and image (if taken upon acceptance of scholarship) in promotional and printed materials.
- Awardees will be posted on social media and on the First Care Health Center website.



Scholarship Application Cover Sheet

Please submit this sheet with your essay.

Name (first, middle, last): _____

Address: _____

City, State, Zip Code: _____

Email Address: _____

Phone Number: _____

Name of Parent(s) or Guardian(s): _____

High School: _____

Grade Point Average (please provide your current unweighted GPA): _____

College, University, or Vocational/Training School You Plan to Attend: _____

College, University, or Vocational/Training School Admissions Office Phone Number:

Have You Been Accepted at the Institution You Listed Above: Yes No

Anticipated Major or Area of Study: _____

Submit an essay — Use the online submission portal to submit a 500-700 word essay to the question — What field or major do you intend on studying and how does it impact rural health in your community?