

SCHOLARSHIP  
APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

1. Area of Study \_\_\_\_\_

School You Will Be Attending \_\_\_\_\_

Type of Degree:     Undergraduate     Graduate  
                            Other \_\_\_\_\_

2. Education. List high schools, colleges, or vocational training, beginning with current or most recent:

School	City	Dates Attended	Degree/Diploma

If you are currently a high school student, when do you expect to graduate? \_\_\_\_\_

If you are currently a college student, how many more credits do you need to graduate? \_\_\_\_\_

When do you expect to graduate? \_\_\_\_\_

Have you ever received a scholarship from CRMC? Yes \_\_\_\_ No \_\_\_\_ When \_\_\_\_\_

3. Work Experience

Employer	Type of Work	Dates

4. Awards, Honors, Scholarships

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5. Activities and Interests

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6. Goals (briefly describe your career goals and what you consider to be necessary qualifications for success)

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7. Please explain what your anticipated expenses will be per semester while pursuing your goals and how the funds will be used.

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8. Financial Information. All information will be held in strictest confidence. Please include all means of financing education. Check and explain.

\_\_\_ Personal \_\_\_\_\_

\_\_\_ Grants \_\_\_\_\_

\_\_\_ Loans \_\_\_\_\_  
\_\_\_ Scholarships \_\_\_\_\_  
\_\_\_ Parental \_\_\_\_\_  
\_\_\_ Spouse \_\_\_\_\_  
\_\_\_ Other \_\_\_\_\_

If you are personally financing your education, what is your approximate annual income?  
\$ \_\_\_\_\_

If your parents are financing your education, please complete the following:

Parent's Names \_\_\_\_\_

Household Annual Income    \_\_\_ Under \$20,000    \_\_\_ \$20,000-\$40,000    \_\_\_ \$40,000-\$60,000  
   \_\_\_ \$60,000-\$80,000    \_\_\_ over \$80,000

How many people are dependent on this income or combined incomes? \_\_\_\_\_

I verify that the above information is correct and I give permission to contact any sources if necessary to verify this information.

\_\_\_\_\_  
(signature)

9. Letters of Recommendation

Letters of recommendation are encouraged. Letters should be addressed to:  
CRMC Foundation, 1400 W. 4<sup>th</sup> Street, Coffeyville, KS 67337

10. Additional Scholarship Requirements May Vary. Please see the attached page for additional Requirements. I am applying for:

\_\_\_ Han Family Scholarship                      \_\_\_ Best Family Scholarship

\_\_\_ Stephen S. Ellis Memorial Scholarship    \_\_\_ John & Edna Cape Scholarship

## **CRMC FOUNDATION** **SCHOLARSHIP INFORMATION**

### **Best Family Scholarship**

This scholarship was established by the children of Jerry and Norma Best. The intent of the scholarship is to provide financial assistance to students in the four-state area that have been accepted into an accredited medical field program (paramedic, lab, x-ray, nursing, medicine, etc).

1. \$500 per semester. May be ongoing throughout course of study.
2. Enrolled in accredited medical program.
3. Resident of the United States with preference given to residents of the four state area (NE Oklahoma, SW Missouri, SE Kansas, and NW Arkansas)
4. Applicants must submit the CRMC Foundation Scholarship Application and a typed, personal reflective essay on why they chose to pursue a career in healthcare. This essay must be at least 500 words. A formal interview may be requested by the committee members.
5. Grade and GPA Transcript information should be submitted with the application.
6. The level and length of assistance is to be determined by a committee of members of the Best Family.
7. Financial Payments will be made directly to the institution.

### **Stephen S. Ellis Memorial Scholarship**

This scholarship was established to honor the memory of long-time Coffeyville physician Dr. Stephen S. Ellis. Funds to support the scholarship were given by colleagues, friends, and loved ones of Dr. Ellis.

1. Scholarship amount is at the discretion of the Foundation scholarship committee and CRMC Foundation Board.
2. The candidate shall be a senior at Field Kindley Memorial High School.
3. Be a student with a history of strong academic performance in coursework which is clearly preparatory to the medical profession.
4. Be recommended by the guidance officer and teachers of FKHS as deserving of the recognition and financial assistance accorded by receipt of the scholarship.
5. Submit the CRMC Foundation Scholarship Application and prepare a brief essay which expresses the student's educational goals and plan of application of the education.
6. Submit a budget plan for expenses expected to incurred.
7. The candidate should express a sincere intent to return to Coffeyville upon completion of academic study to apply skills learned.
8. Financial Payments will be made directly to the institution.

### **John & Edna Cape Scholarship**

This scholarship was established by the John K. and Edna M. Cape Trust. The intent of the scholarship is to offer financial assistance to a student who has a desire to become a Dietician.

1. Applicant must be a junior or senior undergraduate student participating in an approved dietary study program or a graduate student pursuing certification as a dietician.
2. Undergraduate juniors/seniors may receive up to \$5,000 per year. Graduate students may receive up to \$10,000 per year.
3. Applicants must submit the CRMC Foundation Scholarship Application, Federal Application for Student Financial Aid, and official college transcripts.
4. Recipients must maintain a minimum GPA of 3.2
5. Applicants may be required to participate in an interview.
6. Financial Payments will be made directly to the institution.

### **Han Family Scholarship**

This scholarship was established by the children of Dr. and Mrs. Chan Han, longtime Coffeyville pediatrician. The intent of the scholarship is to provide financial assistance to employees of CRMC who are continuing their education in a medical field/program. (paramedic, lab, x-ray, nursing, medicine, etc).

1. Enrolled in accredited medical program.
2. Employee of Coffeyville Regional Medical Center.
3. Applicants must submit the CRMC Foundation Scholarship Application and a typed, personal reflective essay on why they chose to pursue a career in healthcare. This essay must be at least 500 words. A formal interview may be requested by the committee members.
4. Grade and GPA Transcript information should be submitted with the application.
5. The level and length of assistance is to be determined by the CRMC Foundation Board and members of the Han Family.
6. Financial Payments will be made directly to the institution.