

Virginia Gay Hospital & Clinics Scholarship Application

Due Date: *April 1*

- Application is to be completed by applicant intending to further education in medical field.
- Attach the following to the completed application:
 1. Two letters of reference from non-family members. (one should be from a teacher providing evidence of ability to achieve goals.)
 2. A one page biographical essay, which includes your professional goals and reasons why you feel you should be selected for this scholarship.

Please send this application with a transcript and attachments to:

VGH Foundation Director
502 N. 9th Avenue
Vinton, IA 52349

Student Information

Name:

Address, City State:

Family Information

Father's Name:

Mother's Name:



Education Information

High School: Benton Community Center Point-Urbana Vinton-Shellsburg

Class Percentile:

GPA:

ACT:

College of Choice:

Field of Choice:

Scholarship Questions

Awards and Honors received:

List Church and Community organizations and years involved in:

List School Activities and years involved in:

Signature of Applicant: Date: