



## Healthcare Careers Scholarship Application

You are eligible to apply for this scholarship if you plan to pursue a career in a healthcare related field at an accredited technical college or four-year university. This scholarship is available to graduating seniors from high schools in the following communities: **Barron, Bloomer, Chippewa Falls, Fennimore, Lodi, Eau Claire, Osseo-Fairchild, Rice Lake, Spooner, St. Croix Falls, and Superior.** The scholarship award amount will be listed at the high school you attend. Winners agree to submit JPEG file of senior photo for release to media and Dove Healthcare social media.

**INSTRUCTIONS:** Email this completed application with essay to [info@dovehealthcare.com](mailto:info@dovehealthcare.com).  
**Dove Healthcare must receive your materials by April 1 to be considered.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
First \_\_\_\_\_ Last \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

High School: \_\_\_\_\_ GPA: \_\_\_\_\_

Are you enrolled or have you been accepted into an accredited technical college or four-year university?  
\_\_\_\_ YES \_\_\_\_ NO

What program are you enrolled in or what is your intended major? \_\_\_\_\_

List the school activities you have been involved in during high school:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the community activities you have been involved in during high school:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ESSAY:** Please include a short essay (250 - 500 words) about why you have chosen a future career in healthcare. Please indicate your future educational and career goals. Also, include people or events that may have helped influence you and describe opportunities you have had to work or observe in this career field. Finally, include how this scholarship will impact your future education.

*Caring for Wisconsin* PERSONAL. LOCAL. LOYAL.