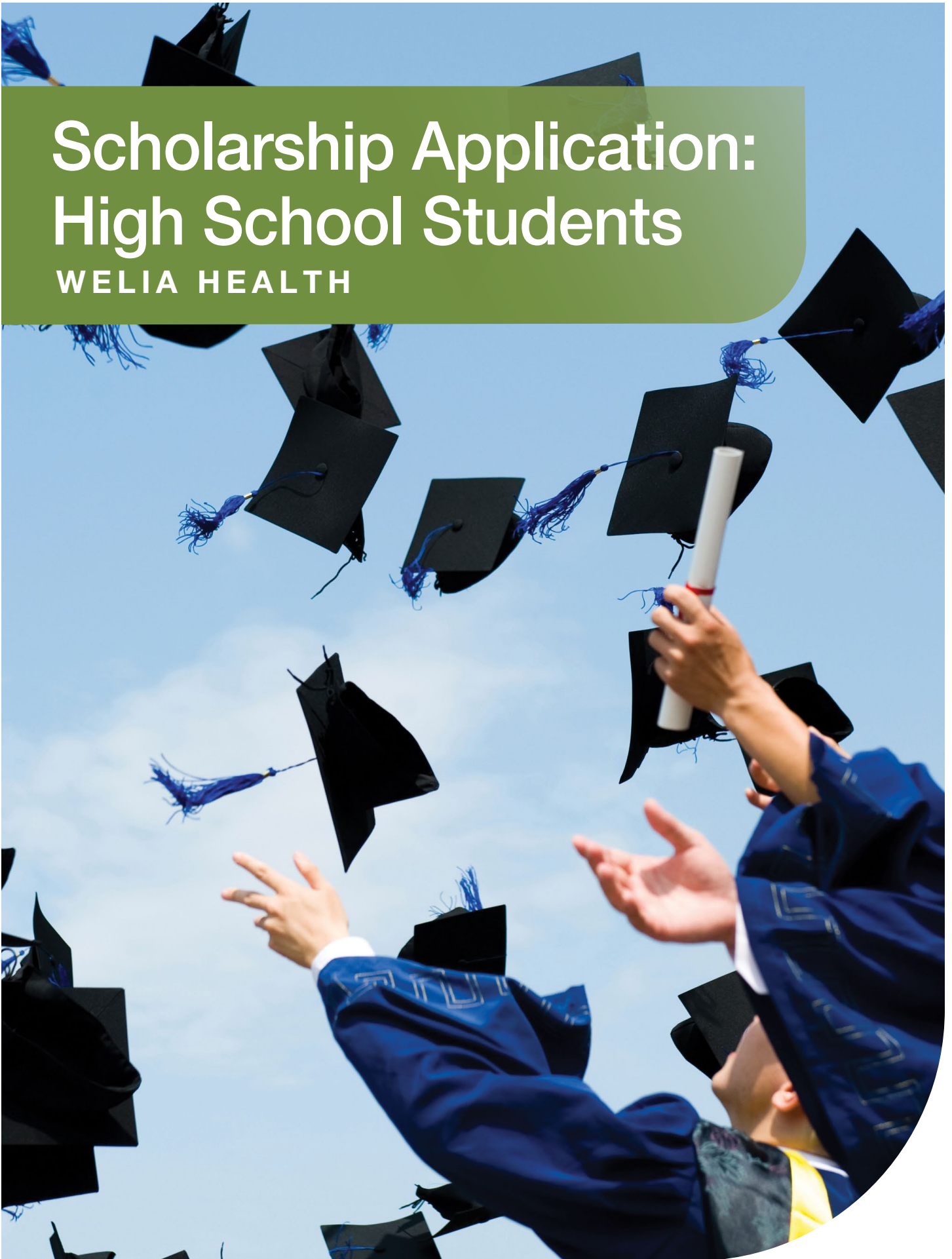


Scholarship Application: High School Students

WELIA HEALTH



Scholarship Guidelines

Continuing with its mission to support and improve the health of the communities it serves, Welia Health seeks to assist area students with their desire to continue their education into the healthcare related field.

Scholarship

Welia Health offers a **\$2,000 scholarship to a graduating high-school senior** from each of the following school districts: Mora, Ogilvie, Hinckley, and Pine City, Minnesota.

The scholarship is renewable (for up to four years) if the recipient:

- continues to be enrolled full-time (maintaining a minimum credit load of 12 semester credits) in a two or four-year post-secondary degree program in an area of health care
- maintains a 3.2 cumulative GPA while in college

Eligibility

Scholarship applicants should want a career in the healthcare field that is deemed as an occupational need by Welia Health. Interested applicants must have a cumulative GPA of 3.5 or more, on a 4.0 scale.

Application Form

Students choosing to apply for this scholarship should:

- **Fill out an official application** obtained from their school counselor's office
- **Include a letter of recommendation** from a school official
- In this letter, the school official should predict the student's future success in a post-secondary environment and forth-coming career in the health care industry
- **Write an essay**
The 1-2 page essay should describe the student's educational goals as they relate to a health care occupation of choice.
- **Include an official copy** of their most recent transcripts

Deadline

Deadlines will be determined on an annual basis.
Please check with your school for more information.

Welia Health

Welia Health will reserve the right to request an applicant to maintain their status as a student in good standing and utilize their photo, story, and name in publications and online for promotional purposes.

Welia Health Scholarship Application

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Cell Phone _____ Email _____

Mora High School

Hinckley/Finlayson High School

Pine City High School

Ogilvie High School

Expected Graduation Date _____ High School GPA (3.5 minimum) _____

Rank out of total students _____ Date of rank _____ ACT Score _____ Date of score _____

I hereby consent to and approve in all respects the terms and conditions of the agreement located here: <https://www.weliahealth.org/image-release/>

Intended College/Post-Secondary Plans. School name? Program of study? Length of program?

Describe the school activities in which you participated during your high school career. Include duration of participation:
(please attach additional pages as needed)

Describe the community activities that evidence your interest in community. Include duration of activity:
(please attach additional pages as needed)

Letter of Recommendation

Include a letter of recommendation from a teacher at your school that describes their prediction of your future success in a post-secondary environment and a forthcoming career in the health care industry.

Essay Requirement

Include a one-two page essay describing your educational goals as they relate to a healthcare occupation.

DON'T MISS THE DEADLINE

*Please check with your school counselor
to confirm the deadline date
for this year's scholarship applications.*

