

HEALTH CAREER LOAN/GRANT & SCHOLARSHIP APPLICATION

Pertaining to scholarships and loans offered by McDonough District Hospital, the Auxiliary to MDH and MDH Foundation.

I. Statement of Primary Purpose

To help provide qualified personnel to McDonough District Hospital.

II. Requirements for a New Applicant

- A. Letter of acceptance into the professional curriculum of an accredited health career program. General education requirements are not considered part of a “professional curriculum”.
- B. Completed application form, including a description of applicant’s background in health care and a narrative profile of the applicant, stressing factors relevant to the applicant’s occupational choice and goals.
- C. An official high school and/or college transcript.
- D. Three letters of reference from teachers, counselors, employers, or supervisors.
- E. The completed application with all required supporting documents received by MDH Human Resources Department **no later than June 1**. Incomplete applications will not be considered.

III. Factors to be Considered by Screening Committees

- A. Projected personnel needs of McDonough District Hospital
- B. Likelihood applicant will desire employment at McDonough District Hospital
- C. Scholastic ability
- D. Character
- E. Financial need
- F. Personal interview
- G. Recommendations

IV. Terms of Loan/Grant

- A. The loan/grant will be distributed in one installment.
- B. Arrangements for repayment of an Auxiliary loan must be made within 30 days after the student graduates, drops below ½ time, withdraws, resigns or is dismissed from the health career program.
- C. If upon graduation the student is employed by McDonough District Hospital, the student shall receive credit toward repayment of the Auxiliary loan/grant at the rate of \$1.00 per hour worked. The Auxiliary loan/grant is not subject to federal income taxes per IRS code section 108(f), and therefore will not be taxed.

V. Re-application for Previous Year’s Recipients

A re-application form is available through MDH Human Resources Department or online at www.mdh.org.

McDonough District Hospital, the Auxiliary to MDH and MDH Foundation provide funds and have established scholarships for qualified persons interested in pursuing a career in health care. Loans/grants and scholarships for education in health careers are available to MDH employees, families, and interested community members meeting application criteria.

GABBERT NURSING SCHOLARSHIP

Established in 2004 by Larry K. and Joyce E. Gabbert to provide one or more nursing scholarships at \$500.00 each per year. The scholarship(s) may not be used for a nursing student pursuing advanced degrees such as nurse practitioner or CRNA. Rather, the fund should be used for pursuing a CNA, LPN, or RN.

DONNA M. TWOMEY NURSING SCHOLARSHIP

Established in 2011 by Dr. Patrick M. and Donna Twomey. Donations made to provide one nursing scholarship at \$500.00 each per year. The fund should be used for nursing students pursuing education at any level (ADN and BSN). The donor requests funds not be used for a nursing student pursuing advanced degrees such as MSN, nurse practitioner or CRNA.

GAYLE AND RON PETERSON NURSING SCHOLARSHIP

Established in 2007, the Gayle and Ron Peterson Nursing Scholarship is to be awarded to one student pursuing an RN degree. The scholarship is \$700 per year. Scholarship should not be used for a nursing student pursuing advanced degrees such as MSN, nurse practitioner or CRNA.

RUBY TEEL HEALTH CAREER SCHOLARSHIP

The Ruby Teel Health Career Scholarship was established in 2001 in honor of Ruby Teel. Each year, at least one \$500 scholarship will be awarded to a student pursuing a career in health care. The amount is determined by the interest earned from the prior year on the initial gift of \$10,000.

HALDON AND HAZEL CURLESS NURSING SCHOLARSHIP

The scholarship was established in 2013 in memory of Haldon and Hazel Curless. The Haldon and Hazel Curless Nursing Scholarship is to be awarded annually at \$500.00 to one or more students pursuing a CNA, LPN, or RN (ADN or BSN). The funds should not be used for a nursing student pursuing advanced degrees such as nurse practitioner, physician assistant, or CRNA.

MAXINE SIMERAL SCHOLARSHIP

The Maxine Simeral Scholarship was established in 2010. Each year, one \$1000.00 scholarship will be awarded to a recipient pursuing a health career, not limited to nursing.

HELEN MEEK SCHOLARSHIP

The Helen Meek Scholarship was established in 2009. Each year, one \$750 scholarship will be awarded to applicant pursuing a health career, not limited to nursing.

CAROLYN J. BAUMANN NURSING SCHOLARSHIP

The Carolyn J. Baumann Nursing Scholarship was established in 2014. Each year, one \$500 scholarship will be awarded to an applicant pursuing a BSN at Western Illinois University. The student must be a junior or senior and reside in McDonough or Hancock Counties.

OTHER SCHOLARSHIPS

As funds allow, additional scholarships may be awarded to applicants. Information regarding these scholarships is available through the MDH Auxiliary/Volunteer Office at 309-836-1579 or MDH Human Resources Department at 309-836-1577.

TUITION REIMBURSEMENT FOR MDH EMPLOYEES ONLY

Any employee who has completed six months of employment at MDH and is employed in any status other than registry may apply for tuition reimbursement. The course content must be directly related to the enhancement of the employee's present job, or related to a position staffed at MDH that the employee plans to pursue. Approval of the class must be made prior to the start of the class. Employees are reimbursed for the tuition upon completion of the course. Only grades of "B" or better will be reimbursed. An annual tuition dollar limit is placed on employees using tuition reimbursement. Additional information and applications for tuition reimbursement is available through the MDH Human Resources Department.

Please retain pages 1-3 for your files and only return the application (pages 4-7).

Information concerning Auxiliary loan/grants and scholarships may be obtained by calling:

MDH Auxiliary/Volunteer Office
309-836-1579

or

MDH Human Resources Department
309-836-1577

HEALTH CAREER LOAN/GRANT & SCHOLARSHIP APPLICATION

Please print or type. All applications must be returned **no later than June 1** to:

MDH Human Resources
525 E. Grant St.
Macomb, IL 61455
309-836-1577

I am interested in applying for the following funds. (Please mark all that apply):

_____ Auxiliary Loan*

_____ Scholarships/Grants

***If upon graduation the student becomes employed by McDonough District Hospital in a position directly related to education funded, then the student shall receive credit toward repayment of the Auxiliary loan/grant at the rate of \$1.00 per hour worked.**

PERSONAL INFORMATION:

Name			
Current Address			
Phone		MDH Ext.	
Permanent Address (if different)			
Email Address			
How did you learn about the loan and scholarship program?			

EDUCATION INFORMATION:

Previous Education

High School Name			
Year of Graduation			
Previous College Attended			
Number of Years Completed			
Type of Degree Obtained (if applicable)			

Current Education

School Name			
Address			
Expected Enrollment Date		Expected Graduation Date	
Will you attend full-time or part-time? If part-time, what else will you be doing while attending?			
Type of Degree/Diploma/Certification to be obtained:			

EMPLOYMENT HISTORY:

<i>Employer</i>	<i>Job Title</i>	<i>Full-time or Part-time</i>	<i>Dates of Employment</i>

VOLUNTEER EXPERIENCE:

<i>Organization</i>	<i>Duties:</i>	<i>Dates:</i>

Education-Related Expenses and Assistance (Annually):

<i>Expenses:</i>		<i>Other Financial Assistance Applied For:</i>		
Tuition and Fees	\$		Y/N	Amount Received
Room Charges	\$	IL State Scholarship		\$
Board Charges	\$	IL Guaranteed Student Loan		\$
Books & Supplies	\$	PELL Grant		\$
Transportation	\$	Employer Tuition Reimbursement:		\$
Other	\$	Other (Specify):		\$
	\$			\$
				\$
TOTAL	\$	TOTAL		\$

I do affirm that the above information is true and correct to the best of my knowledge. I firmly plan to complete my intended course of study. I am submitting this application for the purpose of obtaining a Health Career Loan/Grant or scholarship and authorize the release of information concerning any statements made herein. I understand that incomplete applications **will not be considered** and that all supporting documentation should be included with the application and submitted prior to the deadline.

Signature of Applicant: _____ Date: _____

Have you included the following documents with your completed application form?

- ☐ Letter of Acceptance into Health Career Program
☐ Official high school and/or college transcript
☐ Three letters of reference

BACKGROUND IN HEALTH OR SCIENCE-RELATED FIELD: (Please print or type)

If you have been involved in any health or science-related fields or activities, either as a part of your employment or as a volunteer, please describe.

[illegible]

NARRATIVE (Please print or type)

Please provide, in narrative form, your professional goals and a profile of yourself, stressing factors relevant to your occupational choice and goals and the qualifications you have to pursue your occupational choice to reach your goals. Provide additional information regarding school, clubs, extracurricular activities, hobbies, future plans, etc.

[illegible]