

SCHOLARSHIP OPPORTUNITIES

Fact Sheet

RUTH B. CAMP SCHOLARSHIP

- Who may apply? Nursing and paramedical students pursuing undergraduate and graduate degrees.
- Criteria: Academic performance, professional and personal characteristics, financial need, present need in the field of specialty for which funds are requested, and availability of scholarship funds.
- Service Commitment to Huntsville Hospital after receipt of scholarship is required

RONALD S. OWEN SCHOLARSHIP

- Who may apply? Children of Huntsville Hospital employees pursuing undergraduate degrees in any field of study.
- Criteria: Academic performance, extracurricular activities, community service, demonstrated leadership, and financial need.
- Parent must have been employed at Huntsville Hospital for at least one year, as of May 31, 2008.
- Children must be a dependent of the employed parent.
- This is a one-time scholarship.
- Amount of scholarship is **not predetermined** and will vary.

THE FOLLOWING APPLIES TO BOTH THE RUTH B. CAMP AND RONALD S. OWEN SCHOLARSHIPS

- Application must be complete with **all** information as asked, including salary information. **An incomplete application will not be considered.**
- All transcripts and letters recommendation must be provided by the student and turned in to the Foundation with completed application. The only exception to this rule will be as follows: If school will not provide an original transcript to the student, unofficial transcripts are acceptable and must be included in completed application. An original transcript may then be mailed to the Foundation.

**Application will be available online and in the Human Resources and
Foundation offices beginning February 1, 2008.**

Deadline for submission is May 30, 2008.

For more information, call 265-8077.

Ruth B. Camp Scholarship Application 2008 – 2009 School Year

PERSONAL INFORMATION

Name (First)	(Middle)	(Last)
Address		
City	State	Zip
Telephone Numbers: (Home)		(Work)
Date of Birth	Employee #	
Social Security #		
Have you previously applied for a Camp Scholarship?		If so, what year(s)?
Have you ever been awarded a Camp Scholarship?		If so, what year(s)?

EMPLOYMENT INFORMATION

Employer	From - To	Current Position	Department
	-		

Combined Family Annual Income (all sources)	\$
--	----

PRN?	Part-Time?	Full-Time?
-------------	-------------------	-------------------

EDUCATIONAL INFORMATION

	Institution	From - To	Graduation Date	Cumulative Grade Point Average	Major/ Degree
Community College					
College - Undergraduate					
College - Graduate					

COLLEGE INFORMATION

Where will you attend college during the 2008 - 2009 school year?

Will you be attending college on a full-time _____ or part-time _____ basis?

Are you eligible for the hospital tuition reimbursement plan?

If not, why?

Will you be enrolled in the reimbursement plan for the 2008-2009 school year?

STATEMENT OF FINANCIAL NEED

Please describe your financial need for this scholarship (use attached sheet if necessary):

FINANCIAL AID

Are you receiving scholarships or financial aid from other sources during the 2008 - 2009 school year? _____ If so, please list below:

Name of Scholarship/Grant	Amount Received for the 2008 – 2009 school year

ATTACHMENTS

Please include the following documents with this application.

An incomplete application will NOT be considered.

- ◆ Official college transcript
- ◆ Two letters of recommendation (1 from your supervisor and 1 from a university professor/representative)
 - Please ask that they include a return address and telephone number.
 - Have letters sent to the address listed below.

I have read the scholarship agreement and will comply with its terms if selected to receive the Ruth B. Camp Scholarship. I have not been on academic or social probation. I have no criminal record that will prohibit me from obtaining licensure. I understand that falsification of any information on this application will be just cause for immediate termination of this agreement and will make the scholarship repayable as described in the contract.

Student Signature _____ Date _____

**Please Return Completed Application Package To:
Ruth B. Camp Scholarship Committee
Huntsville Hospital Foundation
101 Sivley Road
Huntsville, AL 35801**

**APPLICATIONS MUST BE RECEIVED IN THE
FOUNDATION OFFICE BY MAY 30, 2008
Scholarship will be awarded in July 2008**

For more information, call Huntsville Hospital Foundation, (256) 265-8077