

PARKLAND HEALTH CENTER FOUNDATION

LANDRUM-HIRSCH MEMORIAL SCHOLARSHIP APPLICATION FORM - \$2,000 AWARDED ANNUALLY

The Landrum-Hirsch scholarship was created by Stuart Landrum and Jack Hirsch to both honor their wives and promote the field of nursing. Mr. Landrum chaired the original steering committee of Community Hospital, now Parkland Hospital from 1962-1969, and served on the original hospital board. Jack Hirsch was the administrator of Medical Arts Clinic in Farmington from 1962 to 1984. He also served on the hospital board of directors from 1969-1997. This scholarship is reviewed and provided by the Parkland Health Center Foundation.

INSTRUCTIONS

Please complete the entire application, sign and date and return to Mineral Area College's Financial Aide Office. The student awarded the scholarship will be notified by MAC email at the time an award is made. Attach a one-page document noting your academic information and achievements, one letter of personal recommendation from a representative of your community, including the name and contact information of the person writing the recommendation, as well as a copy of your college transcript.

PERSONAL INFORMATION

APPLICANT NAME _____

HOME ADDRESS _____

ADDRESS

CITY

STATE

ZIP

CONTACT PHONE NUMBER _____ EMAIL ADDRESS _____

DOB _____ CURRENT COLLEGE GRADE POINT AVERAGE (GPA) _____ (ON A 4 POINT SCALE)

ARE YOU THE FIRST PERSON IN YOUR FAMILY TO ATTEND COLLEGE? (CIRCLE ONE) YES NO

WHAT DEGREE ARE YOU PURSUING? _____

NUMBER OF COLLEGE CREDITS EARNED TO DATE _____

EMPLOYER _____ JOB TITLE _____

ACADEMIC INFORMATION AND ACHIEVEMENTS

Please include the following information in a one-page document.

- A. List any academic honors, awards and membership activities while in high school
- B. List your extracurricular activities and college related volunteer activities
- C. List your volunteer activities in the community
- D. List your planned field of study and why you choose this field
- E. List your personal goals
- F. List your professional career objectives

I certify the information that I have provided on this application is true, complete and correct to the best of my knowledge.

SIGNATURE OF APPLICANT _____ DATE _____

PLEASE CHECK THAT YOU ARE SUBMITTING THESE ITEMS

- ____ Completed Landrum-Hirsch Memorial Scholarship form
- ____ One-page document noting academic information and achievements
- ____ One letter of recommendation supporting the applicant from a community member supporting your future plans
- ____ Transcript records from prior semesters