Written Policy for Scholarship Grants

A. Criteria for selecting recipients:
   1. Applicants must have a sound educational background and proven record of achievement.
   2. MUST BE WORKING TOWARD A HEALTHCARE DEGREE EXCLUDING PRE-MED, AND BE ENROLLED IN THE DEGREE PROGRAM
   3. Must have completed 60 credit hours towards a healthcare bachelor's degree or 30 credit hours towards a healthcare associate's degree by the end of spring 2016 semester.
   4. In need of financial assistance which cannot be provided by family
   5. Willing, but not required, to consider employment at Medical City Dallas after graduation
   6. Must be a citizen of the United States, or a permanent resident

B. Procedure for selecting recipients:
   1. Application must be post-marked by May 31, 2016.
   2. The Scholarship Committee will review all applications in June.
      (The committee includes: Volunteer Scholarship Chairman, Director of Nursing, Volunteer Coordinator, and at least two active members of the Medical City Dallas Auxiliary)
   3. The Scholarship Committee will make final decisions. All applicants will be notified of the committee’s decisions by June 30, 2016.

C. Method of distributing the Scholarship Monies:
   1. The scholarship award money for each recipient will be sent directly to the healthcare degree program’s Department of Financial Aid.
   2. This will be disbursed for the Financial Aid Office to the student, as needed for the registration fees, books, lab fees, and other approved course related expenses.
   3. ANY MONIES NOT USED FOR THE ABOVE EXPENSES BY THE END OF THE SCHOOL YEAR WILL BE GIVEN TO THE STUDENT as the balance of their scholarship award.
   4. The board of directors of the Medical City Dallas Auxiliary will discuss the probability of future awards on an annual basis. Medical City Dallas is a tax-exempt corporation.

Please direct any further questions to: Susan Evans-Lombe, Scholarship Committee Chairman
Susan Evans-Lombe
Scholarship Committee Chairman
Medical City Dallas Auxiliary
8416 Brooksby Drive
Plano, TX 75024
Phone: 972-335-8260
Email: calbear58@verizon.net
MEDICAL CITY DALLAS AUXILIARY
SCHOLARSHIP APPLICATION
(PLEASE PRINT LEGIBLY OR TYPE)

Name ________________________________________________________________

Local Address __________________________________________________________

City, State, Zip Code______________________________ Telephone______________________

Social Security______________________________Birthdate__________________________

E-Mail Address ____________________________________________________________

Completed 60 credit hours towards a healthcare bachelor’s or 30 credit hours towards a
healthcare associate’s degree by the end of spring 2016 semester?

Enrolled hours per semester_____________ (Minimum 12 Hours)

School Attending___________________________________________________________

Major Course of Study________________________ Have you completed one year?____

Tentative Career Plans_______________________________________________________

List type & amount of financial aid you’re receiving (Scholarships or
grants)____________________________________________________________________

__________________________________________________________________________

Are you a citizen of the United States? ______ If no, are you a permanent resident? 

Are you presently employed? _________ If yes, where? _____________________________

Department________________________ Supervisor__________________ Phone______________

Extra-curricular activities and interests________________________________________

On a separate sheet of paper, briefly explain in one page (printed or typewritten) why you
should be considered for this scholarship and how you would benefit. Please indicate your
financial need (be specific). We ask that you return the separate sheet of paper, this
scholarship application, two written personal references (no relatives or school friends) and
an official copy of your current college transcript (through May, 2016) to:

MEDICAL CITY DALLAS AUXILIARY
ATTN: SUSAN EVANS-LOMBE, CHAIRMAN, SCHOLARSHIP COMMITTEE
8416 BROOKSBY DRIVE
PLANO, TEXAS 75024

Deadline for your application is May 31, 2016. If you have questions, please call Susan
Evans-Lombe at 972-335-8260 or e-mail her at calbear58@verizon.net