

The Boulder Community Health Ambassadors (BCHA), a volunteer organization devoted to supporting the hospital and the community it serves, is proud to offer the following *Human Health Care Scholarship Program*.

This year's awards and amounts will be limited due to decrease in revenue from our funding sources.

Read application and all information carefully. Deadline and requirements enforced: No exceptions. Deadline for submission is February 18, 2022 by 4 pm.

SCHOLARSHIP COVERAGE

- Human health care education at an accredited Colorado Institution or an accredited online institution.
- Visit, <http://higher.ed.colorado.gov/Data/InstSelect.aspx>, for qualifying Colorado institutions.
- 2022 awarded monies are for one academic year (June 2022 – May 2023).
- Tuition only; **excluded** are room, board and books.
- Scholarship awards are paid directly to the financial office of the institution attending.

WHO CAN APPLY *Cumulative 3.0 GPA required.*

- Former BCHA scholarship recipient who desires to continue his/her human health care education. **(Section A, C if applicable)** *Scholarships awarded maximum of 4 times.*
- Graduating high school senior attending a public or private school within the boundaries of Boulder Valley School District RE-2, who has been accepted as a full-time student by an accredited Colorado Institution. (Sections A and B)
- Graduating high school senior who has been accepted as a full-time student by an accredited Colorado Institution and is a child of a current BCH employee, with over 2 years of full or half-time (18-35 hrs/week) employment at BCH. The school district is whichever district the BCH employee resides. **(Sections A and B)**
- Currently active BCH volunteer or current Junior BCH Volunteer (graduating high school senior living outside Boulder Valley School District RE-2), who has completed a minimum of 150 BCH volunteer hours as of March 4, 2022 & has been accepted as a full-time student or presently enrolled at an accredited Colorado Institution. **(Section A, B & C if applicable)**
- Current employee of BCH with 2 years of full-time or half-time (18-35 hrs/week) employment at BCH as of March 4, 2022, and has been accepted at an accredited Colorado Institution or accredited online institution. Continuing education classes are excluded. **(Sections A and C)**

SCHOLARSHIP SELECTION

Our scholarship committee evaluates submitted applications and selects recipients. The selection process is competitive and award offers are not guaranteed. Applications are reviewed holistically and selection criteria may include, but are not limited to academic record, essay, financial need, and letters of recommendation.

REQUIRED PACKET CONTENT – submit all together

- Signatures as required within the application.
- Transcript from most recent academic year (unofficial transcripts will be accepted, however we may request an official transcript after initial review of your application).
- Two letters of recommendation from non-family members. Letters must be written and dated on or after September 2021. Letters must contain the phone number and email address of the person writing the recommendation
- A one-page essay only (may be double-spaced). *Please title your essay.*

First-Time Applicants address the following question:

“How did you arrive at your decision to pursue an education/advanced degree in health care and how will this scholarship help you meet your goals?”

All Other Applicants address the following question:

“What health care issue, in the United States, would you like to see changed/improved and why?”

INTERVIEWS

Interviews will be conducted as needed the week of February 28 - March 4, 2022.

COMMUNICATIONS

All communications will be via email.

Options for Submitting Completed Application:

- 1. Via email to:** info@bchambassadors.org (include all paperwork in one email. Letters of recommendation may be sent directly to this email from the author.)
- 2. Hand deliver to:** Volunteer Services, Tebo Cancer Center, 4715 Arapahoe Avenue, Suite G-30

If you have any questions, contact us at info@bchambassadors.org.

APPLICANT’S CERTIFICATION:

Applicant understands that if selected for a scholarship, monies will be given directly to school you will be attending, (tuition only, *excluding books, room & board*). Gives permission to use name and photo for PR activities. Any false statement would be cause for termination of this scholarship.

Printed Name of Applicant

Signature

Date

SECTION A: To be completed by ALL scholarship applicants (print clearly)

Name _____

Email _____

Phone _____

Address _____

Proposed or current major: _____

School Planning to Attend: _____

Yearly cost of tuition _____

HIGH SCHOOL/COLLEGE ATTENDANCE:

School	City & State	Dates Attended	Graduation Date
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WORK EXPERIENCE: *Paid work experience in past three years, list most recent first*

Employer	Dates	Job Title	Hours/week
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COMMUNITY ACTIVITIES: *Activities & positions of leadership outside work or school*

SECTION A continued:

FINANCIAL NEED: *How will you finance your education? Is there any information, regarding your financial situation, you would like to bring to the attention of the Scholarship Committee? All information is held in confidence. Use separate paper if necessary.*

Other scholarships, grants, loans you are applying for, with amount & duration:

BCH VOLUNTEER EXPERIENCE:

Are you a current volunteer? _____

Total Volunteer Hours to date: _____

Verification of total hours by the BCH Volunteer Services Department:

Volunteer Services Dept. Rep. Signature _____

Date of Signature _____

SECTION B: To be completed by High School Seniors ONLY. (Print clearly)

PARENTS/GUARDIANS INFORMATION

Name _____

Name _____

Address _____

Address _____

Employer _____

Employer _____

Position _____

Position _____

If parent(s) is a BCH employee(s), obtain Human Resource Dept. signature verifying employment (as of March 4, 2022) and that the employee is in good standing:

BCH Dept. _____

BCH Dept. _____

BCH Position _____

BCH Position _____

Hire date verification _____

Hire date verification _____

HR Dept. Representative *Printed Name*

Signature

Date

SECTION C: BCH Employees with 2+ yrs of completed employment as of March 4, 2022. Obtain HR Dept. signature verifying information.

Initial hire date? _____

Hours worked /week _____

Current Job Title _____

HR Dept. Rep. *Printed Name*

Signature

Date

List BCH activities in which you are involved: