



**BURGESS**  
Auxiliary

# Burgess Auxiliary 2021 Scholarship Application

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Parent's Telephone: \_\_\_\_\_

Have you received a Burgess Auxiliary Scholarship previously?  Yes  No

School attending currently: \_\_\_\_\_ Chosen career field: \_\_\_\_\_

Reason(s) for this career field choice: \_\_\_\_\_

Courses taken in preparation for a career in Healthcare: \_\_\_\_\_

List experience related to this career field; Give details (employment, job shadowing, or volunteering at a hospital or nursing home, etc. is helpful, but not mandatory). Preference will be given to those having experience at a Burgess Health Center facility. \_\_\_\_\_

Name and address of college or institution you will attend or are attending: \_\_\_\_\_

## Items That **Must Be Included** With Application:

### A. **Three** Letters of Recommendation

- 1. School Teacher Name: \_\_\_\_\_
- 2. School Counselor Name: \_\_\_\_\_
- 3. Work/Volunteer Supervisor Name: \_\_\_\_\_
- 4. Church Leader Name: \_\_\_\_\_
- 5. Community Leader Name: \_\_\_\_\_

B. Your personal letter explaining to the Auxiliary why you believe you are deserving of this scholarship

C. Academic transcripts

Applications and all items requested must be recieved by **Mrs. Rhonda Willey**, Scholarship Chairperson, **25271 Co. Hwy 45, Onawa IA 51040**  
**No later than April 15 2021**

If You **DO NOT** contact Mrs. Willey at 25271 Co. Hwy 45, Onawa, IA 51040 by **January 15, 2022** as to whether you will or will not be continuing to pursue a career in the medical field, scholarship funds will not be submitted to your college or institution.

**The Auxiliary awards five \$500 scholarships each year. Scholarship checks are sent directly to the college or institution, and are available at the beginning of the second semester.**

**Students are eligible to receive a scholarship twice**