



2500 NE Neff Road  
Bend, Oregon 97701-6015  
Telephone (541) 382-4321



## ***Cascades East AHEC Nursing Scholarship For Rural or Financially Disadvantaged High School Students***

February 18, 2010

Dear Scholarship Applicant:

The Cascades East AHEC Nursing Scholarship has been established to assist a rural or financially disadvantaged high school senior who wishes to pursue a career in nursing. The scholarship is administered by the Cascades East Area Health Education Center.

Specifics about the scholarship are:

- **The scholarship will be awarded to a student who is planning to enter a nursing program.**
- A \$1000 grant to be used for tuition, books, or direct fees for school.
- Student must currently be a resident, or enrolled in school(s) in the counties of Deschutes, Crook, Jefferson, Lake, Wheeler, Grant, Malheur, Harney, or Klamath County, or the Warm Springs Community. **Applicants must have resided, or been enrolled in school(s) in this area for a minimum of four years.**
- Applicants will be evaluated, in order stated: a) potential as a nurse; b) career plans in nursing; c) financial need; d) scholastic record.
- Grade point accumulative minimum: 2.5

Completed applications, including necessary attachments, are due to Cascades East AHEC at St. Charles by **Wednesday April 5, 2010**. Please mail to Sasha Bronson, Cascades East AHEC, 2500 NE Neff Road, Bend, OR 97701.

After review by the Scholarship Committee you may be selected as a finalist, and asked to be present for a personal interview. Interviews will be held in Bend May 10, 2010.

The scholarship award will be announced and monies awarded as soon as possible.

Sincerely,

A handwritten signature in blue ink that reads "Jennifer Valentine".

Jennifer Valentine, Executive Director  
Cascades East AHEC  
(541) 706-2603

Enclosures

**HIGH SCHOOL SENIORS and FIRST YEAR COLLEGE STUDENTS**  
*Cascades East AHEC Nursing Scholarship for Rural or Financially Disadvantaged Students*

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

ETHNICITY: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**Please attach a high school transcript or similar documentation and return by April 5, 2010 to:**

Sasha Bronson, Cascades East AHEC at St. Charles Medical Center  
 2500 NE Neff Road, Bend, OR 97701

Applicants must currently be a resident, or enrolled in school(s) in the counties of Deschutes, Crook, Jefferson, Lake, Wheeler, Grant, Malheur, Harney, or Klamath County, or the Warm Springs Community. **Applicants must have resided, or been enrolled in school(s) in this area for a minimum of four years.**

How long have you resided in Central/Eastern Oregon? \_\_\_\_\_ Years \_\_\_\_\_ Months

How long have you been enrolled in school(s) in Central/Eastern Oregon? \_\_\_\_\_ Years \_\_\_\_\_ Months

Name of School(s) \_\_\_\_\_ Town(s) \_\_\_\_\_

Have you applied, or been accepted to a college?  Applied  Accepted

Are you currently enrolled in a college (proof of enrollment may be requested)?  Yes  No

Name of College where you have applied, been accepted or are enrolled:

College: \_\_\_\_\_

Address \_\_\_\_\_

**WORK HISTORY**

Employer/Address/Phone	Date Employed	Job Title/Description of Duties	Reason Left
_____ _____ _____	From _____ To _____		
_____ _____ _____	From _____ To _____		
_____ _____ _____	From _____ To _____		
_____ _____ _____	From _____ To _____		

**EDUCATION AND TRAINING**

Schools	Name and Address of School	From	To	Graduated Yes/No	Degree	Average Grade	Specialization
High School							
Special							
Special							

**FINANCIAL STATEMENT**

1. Marital Status:  Single  Married  Divorced  Separated
2. Total number of dependents (Do not include self): \_\_\_\_\_
3. During the upcoming academic year, I will live with:  Parents  On My Own  Relatives
- Other, specify \_\_\_\_\_

4. Please fill in the following budget for the next school year: September, 2010 – June, 2011

a. Tuition and Fees (Registration/Testing) \$ \_\_\_\_\_

b. Books and Supplies \$ \_\_\_\_\_

c. College Room and Board \$ \_\_\_\_\_  
(not mortgage or family food bill)

d. Other (please specify; i.e., child care, transportation,  
outstanding debts, mortgage payment for number of months  
in school, other costs for certification)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL ESTIMATED EXPENSES

\$ \_\_\_\_\_

Estimated Income (how the estimated expenses will be earned):

a. Savings \$ \_\_\_\_\_

b. Employment during school year \$ \_\_\_\_\_

c. Spouse's employment during school year \$ \_\_\_\_\_

d. Other income (please specify; i.e., scholarships, grants,  
relatives, trusts, annuities, loans, child support, alimony)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL ESTIMATED INCOME

\$ \_\_\_\_\_

Signature of Scholarship Applicant \_\_\_\_\_ Date \_\_\_\_\_

**DEMOGRAPHIC INFORMATION**

1. Gender: (check one)  Male  Female

2. Ethnicity: (check all that apply)

American Indian/Alaska Native  Asian  Black/African American  Hispanic/Latino  
 Native Hawaiian/Other Pacific Islander  White/Caucasian  More than one (Please list)

\_\_\_\_\_

3. Grade:  Senior  College student year: \_\_\_\_\_ Age: \_\_\_\_\_

4. Program Claim Status: This information is used for scholarship or participation certification for some programs coordinated by Cascades East AHEC (check all that apply to your situation):

Financially Disadvantaged (Please circle family size and family income). The figures used to determine low-income are:

Size of Family*	Income Level**
1	\$18,200
2	\$24,500
3	\$30,800
4	\$37,100
5	\$43,400
6	\$49,700
7	\$56,000
8	\$62,300

\*Includes only dependents listed on Federal income tax forms

\*\*Adjusted gross income for calendar year 2008

Rural  Minority

My parents did not go to college / I will be the first in my family to attend college

My family/ I have been qualified for free and/or reduced lunch at my school.

5. Are you bilingual?  YES  NO

If you answered yes, in which languages are you fluent? \_\_\_\_\_

6. What was your Grade Point Average for the most recent school year? \*\* \_\_\_\_\_

\*\*Please attach the most current school transcript for your academic work with your application.

**PLEASE PROVIDE BRIEF ANSWERS TO THE QUESTIONS BELOW.  
If additional space is needed, attach a separate sheet.**

1. Why have you chosen nursing as a profession?
2. What are your plans to complete your nursing education?
3. What qualities do you possess which, in your opinion, qualify you for the nursing profession?
4. Have you had any experience with caregiving; either in family situations or otherwise? If so, please describe.
5. List below any community activities, honors, or awards you have received.
6. Have you participated in any health occupations classes, worked or volunteered in a healthcare setting in the community? (please describe your experiences)

7. Please share with us how you see your role as a nurse impacting rural communities or disadvantaged populations?

8. **Please attach letters of recommendation from two individuals who can comment upon your potential in the nursing field.**