

ST. LUKE'S HEALTH CARE FOUNDATION GRADUATE DEGREE PROGRAM

2011-2012 School Year

Criteria for Scholarship: Graduate Degree

Description:

The St. Luke's Health Care Foundation Scholarship Program will provide tuition assistance to a St. Luke's associate pursuing a graduate degree.

Scholarship checks will be made jointly to the recipient and his/her college. If the scholarship is not completely used by the end of the semester for which it is awarded, any remaining funds will be returned to the Foundation.

Scholarships will be awarded only once for the 2011-12 school year.

Eligibility Requirements:

1. Applicant must be currently employed at St. Luke's Hospital with at least 3 years tenure at St. Luke's.
2. Applicant is enrolled full or part-time in a graduate degree program which is related to the applicant's area of employment or will enhance the applicant's expertise in a leadership role at St. Luke's.
3. Applicant must provide evidence of academic achievement through a college transcript, on which the cumulative grade point is recommended at 3.2 or above.
4. Applications must be completed in a typed format.

NOTE: If you elect to take fewer hours than stated in the application the Foundation reserves the right to reduce the scholarship on a pro rated basis.

For more information, please contact:

St. Luke's Foundation Office
Phone: 319-369-7716
Fax: 319-369-8822
e-mail: newlankl@crstlukes.com

The application must be submitted by April 10, 2011 to:

Grants Committee
St. Luke's Health Care Foundation
855 A Avenue NE Ste 105
Cedar Rapids, IA 52402

PROCEDURES

ST. LUKE'S HEALTH CARE FOUNDATION MERIT SCHOLARSHIP PROGRAM

GRADUATE APPLICATION

Instructions for completing application.

1. Application is to be completed by applicant.
2. Please type or print clearly.
3. Send the completed application including the following:
 - a. A short biographical essay:
 1. Describing why you are pursuing graduate education;
 2. What your short and long range goals are;
 3. Your financial need, if any.
 - b. Three reference forms from individuals other than family. One of the three references must be from your current supervisor.
 - c. Official college transcript.
4. Send to:

Grants Committee
St. Luke's Health Care Foundation
855 A Avenue NE Ste 105
Cedar Rapids, IA 52402

Application deadline is April 10, 2011
Awarding date will be the week of May 5, 2011

**ST. LUKE'S HEALTH CARE FOUNDATION
GRADUATE DEGREE PROGRAM
2011-2012 SCHOOL YEAR APPLICATION**

Social Security No. _____ Today's Date: _____

Complete Legal Name: _____
Last First Middle

Legal Permanent Mailing Address: _____
Street & Number

City or Town: _____

County: _____ State: _____ ZIP: _____ Phone #: _____

Are you employed: _____ Full-time _____ Part-time _____ Employment Date _____

St. Luke's Department _____

Position _____

Supervisor: _____

Year of graduation from high school? _____

What college are you attending? _____ Program: _____

Are you enrolled as a: _____ Full-time _____ Part-time student? Current # of Sem. hours _____

Cost per semester hour: _____

Number of class hours per semester do you anticipate taking during the 2010-11 school year? _____

What is your cumulative grade point average? _____

Number of class hours completed to date _____ Expected date of graduation _____

List previous degrees/diplomas and date you were awarded them:

Have you previously applied for this scholarship? _____ Did you receive one? _____ When? _____

I certify that all information I have submitted on this application and any supporting documents is true, accurate and complete.

Your Signature

Attach:

- Biographical Essay
- Three completed reference forms
- An official college transcript

**ST. LUKE'S HEALTH CARE FOUNDATION
MERIT SCHOLARSHIP PROGRAM**

1. Applicant's Name _____

2. How long have you known the applicant? _____

3. In what capacity have you known the applicant? _____
(employer, teacher, etc.)

4. Please rate the applicant on the following characteristics:

	Excellent	Above Average	Average	Below Average	Poor
Probability of Success	_____	_____	_____	_____	_____
Dependability	_____	_____	_____	_____	_____
Initiative	_____	_____	_____	_____	_____
Ability to get along with others	_____	_____	_____	_____	_____
Communication Skills	_____	_____	_____	_____	_____

5. Do you feel this applicant is deserving of a scholarship? Yes _____ No _____

6. General comments: _____

Signed _____ Date _____

The above information will be kept strictly confidential.

Deadline is April 11, 2011