The Cass Health Foundation’s Louie and Elsie Hansen Memorial Scholarship is awarding a $5,000 scholarship to a graduate from a Cass County High School with a goal of becoming a health care provider subject to licensure requirements in the State of Iowa, including testing to obtain certification and requires continuing education to maintain that licensure.

Applicants **must be accepted to or currently enrolled** in a health career educational program leading to completion of certification degree or higher.

* + A qualified health care educational program – please see list on page 3 for programs qualified by the Cass Health Foundation Board.
	+ Pre-nursing, other pre-programs and CNA students are not eligible.
* If you are not currently enrolled, but are accepted into a program,
you must include a copy of your acceptance letter.
* Consideration will also be given to applicant’s academics, citizenship, and leadership abilities.
* Scholarships will not be awarded to recipients two consecutive years

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of High School Graduation \_\_\_\_\_\_\_\_\_. High School Attended \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Seniors

What college(s) have you applied to?

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

Have you received a letter of acceptance into the Nursing or MD program?

(not the prerequisites)

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

College Students

What college are you currently or will be attending? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What degree are you pursuing? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any other post-high school education
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All Applicants

On a separate sheet, please provide the following information:

1. Extracurricular activities, honors and/or work experiences.

2. Explain in 200 words or less why you are deserving of this scholarship. Please be concise and include passions, life challenges, how you propose to contribute and/or give back to the community, financial need and anything else you perceive as why you’re deserving.

4. Attach one personal and one professional (ie: clergy, teacher, employer, health care professional) letter of recommendation.

5. Attach a copy of your high school transcript, and/or college transcript if applicable. Please be sure your transcript includes your ACT or SAT score.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If under 18 years of age, a parent or guardian must also sign.

Parent or Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return completed applications by March 29, 2024 to

Mail to: Cass Health

Human Resources

1501 E. Tenth Street

 Atlantic, IA 50022

Email to: careers@casshealth.org

Late applications will not be accepted

Scholarship awards will be paid directly to the student’s college upon receipt of a billing statement.

Public announcement of award recipient will be made no later than May 5th.

The following programs qualify you to apply for the Louie and Elsie Hansen Memorial Scholarship.

Athletic Trainer

Certified Medical Assistant

Certified Registered Nurse Anesthetist

Clinical Laboratory Scientist/Medical Technologist

Clinical Laboratory Technician/Medical Lab Technician

Dietician

Emergency Medical Technology/Technician (EMT Paramedic)

Mental Health Counselor

Nurse – BSN, RN, LPN

Nurse Practitioner

Occupational Therapist

Pharmacist

Pharmacy Technician

Physical Therapist

Physical Therapist Assistant

Physician – M.D. or D.O.

Physician Assistant

Radiology Technician

Respiratory Therapist

Social Worker (MSW)

Speech Therapist

Surgical Technician

Ultrasound Technician