



1401 North Tenth Avenue  
Stayton, Oregon 97383

## Auxiliary Scholarship Program

*2019-2020 Scholarship Application*

Applicant's name \_\_\_\_\_

Physical address \_\_\_\_\_

Mailing address (if different) \_\_\_\_\_

Email address \_\_\_\_\_ Phone (home) \_\_\_\_\_ Cell \_\_\_\_\_

Parent's name \_\_\_\_\_ Parent's phone \_\_\_\_\_

Current school \_\_\_\_\_ Phone \_\_\_\_\_

Address of current school \_\_\_\_\_

College or program intended for 2018/2019 \_\_\_\_\_

Are you a Santiam Hospital Youth Volunteer? Y N If yes, how many hours have you completed? \_\_\_\_\_

Are you a Santiam Hospital Employee? Y N If yes, your current position is? \_\_\_\_\_

Initials indicating the application instruction sheet has been read and understood \_\_\_\_\_

Explain your career goals, field of study, and reasons for choosing this field –

---

---

---

---

---

---

---

---

**Please submit the following, in order.** (Additional sheets may be attached)

- 1. Completed application.**
- 2. A current picture (4x6 or less) attached to the application, for our display at events.**
- 3. Current official or unofficial transcripts.**
- 4. Two letters of reference (preferably from an employer or school official).**
- 5. Resume**
- 6. Activities list (sports, volunteer service, work, awards, etc. in your format)**
- 7. If you are a Santiam Hospital Junior Volunteer, please include a recommendation letter indicating hours of service from the program manager.**



1401 North Tenth Avenue  
Stayton, Oregon 97383

## Auxiliary Scholarship Program

### *2018-2019 Information Sheet*

Throughout the year our Auxiliary members participate in several fundraising activities to raise money for our scholarship program and hospital support. Our members operate the hospital gift shop, sell poinsettias, tulips, and host a fall fashion show and a breakfast. In 2018 we were able to give over ten thousand dollars to local students and have budgeted ten thousand for this year.

To be eligible you must live within our service area. This includes Stayton, Lyons, Mill City, Scio, Jefferson, Aumsville, Gates, Idanha, Marion, Turner, West Stayton, and Sublimity. Please note that Silverton, Salem, Lebanon, and Albany are excluded because these hospitals have their own scholarship programs for their service areas. If you believe you live in our service area but your town is not listed please feel free to contact us. You do not have to be a Santiam Hospital Junior volunteer to qualify.

You must be pursuing a career in a healthcare industry (MD/DO, pre-med, nursing (all inclusive), radiology, Speech, Occupational and Physical Therapy, EMT, pharmacy). If your field of study is not listed, please contact us for clarification prior to applying. **Mental health, dental, veterinarian, administration, and nutritional fields of study are excluded.**

We will begin accepting applications **Jan. 4, 2019**. Application packets must be complete and received **no later than five o'clock on April 4<sup>th</sup>**. Please be certain your packet is mailed with sufficient mailing time to be received by this date or submit it directly to the front desk at the hospital. It must **arrive** before the deadline to qualify. Please send your application and all requested information in one packet, mailed directly to the Scholarship Fund Committee, Santiam Hospital Auxiliary, 1401 North Tenth Street, Stayton, Oregon 97383. Email applications will not be accepted.

You must be willing to attend an interview, in person, at the hospital or make arrangements if unable to attend in person. The tentative date is **April 19, 2019**. Interviews last approximately fifteen minutes. The interviews will be held on the main floor of the hospital. Please wait in the waiting room located next to the cafeteria and gift shop until an interviewer calls you in to the conference room.

We will make every attempt to notify each applicant with results within two weeks of the interview. If selected and in high school, we will send your school notification of your award and a certificate for presentation at your awards ceremony.

To receive awards, you must be accepted by an accredited school, college, or hospital program studying in a qualified field. **It will be your responsibility** to send us, via email (Scholarship@santiamhospital.org) the name of your school, financial aid office address, and your student ID by **July 15, 2019**. Checks will be mailed directly to the school by **August 15, 2019**.

**Successful applicants are only eligible for one scholarship.**

**For more information please contact Genny Baldwin at 503-769-9276 or at**  
Scholarship@santiamhospital.org