

## PAULDING COUNTY HOSPITAL FOUNDATION

Ashley Collins, Executive Director P.O. Box 221 Paulding OH, 45879 419-576-7882

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The Mission of the Paulding County Hospital Foundation: To support the Paulding County Hospital, promoting high quality health care and wellness for the people in our community.

Paulding County Hospital Foundation Scholarship Application

## Applications Due on or before MARCH 19, 2021

Mail to: Ashley Collins, Executive Director PO Box 221 Paulding, OH 45879

Name						
Phone to reach you:	Email addres	ss to reach you:_				
Address		City	State	Zip		
High School		Guidance Counselor				
Parent/Guardian(s) Name/s: _						
Name of institution you plan to	o attend and current sta	atus (accepted, co	ommitted, undecided,	etc.)		
Intended Major			Fully explain your int	erest in this major:		
Have you shadowed or observe	ed this profession? <u>Exp</u>	lain where/wher	and the value of the o	experience:		

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Why are you a good candidate to receive this	award?
How do you plan to finance your future educa	ation? What other scholarships have you received?
	nts (honors, awards, leadership roles, activities), your volunteer non-school related), and describe your employment experience.
a Science teacher you would like to use as a r	nool Guidance Counselor. Give the other Student Evaluation Form to eference. ith him/her:
Applicant Signature	Date
Parent/Guardian Signature	Date
Guidance Counselor Signature	 Date