
Valley Hospital

Vivian Shaver Scholarship 2005

January 1, 2005

Dear Applicant:

This application is for the Valley Hospital Association Vivian Shaver Scholarship in honor of Vivian “Babe” Shaver, a long-time employee of the hospital. She passed away in June 1978 while employed at Valley Hospital.

A minimum of two scholarships will be awarded annually, subject to annual review. In 2005, the Committee will award one \$3,000 and one \$2,000 Vivian Shaver Scholarship. The Vivian Shaver Scholarship is designated for a Matanuska-Susitna Borough High School Senior only; planning to study in any health care field.

Each application for scholarship is reviewed for clarity of health care goals, value of those goals to the health care community, past academic performance and intent to serve in the Matanuska-Susitna Borough. Five finalists for each scholarship will be chosen. The finalists will be interviewed by the Scholarship Committee to assist the Committee in making the ultimate decision.

The successful applicant will be required to supply Valley Hospital with an official registration receipt issued by the registrar of the school prior to issuance of the scholarship award. The scholarship award will be mailed to the school.

Please complete the application provided, the essay of not less than 200 words, financial information, three references including address, telephone number and relationship to the applicant, and a minimum of three reference letters from individuals that you have volunteered or worked for that are not related to the applicant. A copy of the applicant’s transcripts MUST accompany the application. Applications must be returned to the Valley Hospital Medical Center in Wasilla, c/o Scholarship Committee, 950 E. Bogard Road, Suite 218, Wasilla, AK 99654. Deadline for receiving applications is Friday, 4:00 p.m. April 1, 2005.

Thank you for your interest in the Valley Hospital scholarship program.

Valley Hospital Vivian Shaver Scholarship 2005

Personal Information	
Date	
Name	
Phone	
Address	
Nearest Relative	
Educational Background	
High School Attended	
School Presently Attending	
Program Enrolled In	
Three References (Not Related to the Applicant)	
Name	
Address	
Phone Number	Relationship
Name	
Address	
Phone Number	Relationship
Name	
Address	
Phone Number	Relationship

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Future Goals in Health Care
Past Experience Pertinent to Your Goal in Health Care
Community Involvement/Extracurricular Activities (please provide dates, years of involvement, etc.)

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Are you available for a personal interview (circle one)? Yes No

Please provide the following with your application:

1. High School transcripts or any applicable college transcripts (must accompany the application at the time it is submitted)
2. On a separate sheet of paper, a 200+ word essay explaining why you and our community would benefit from this Scholarship.
3. On a separate sheet, your personal education budget, including a summary of funds available to meet educational expenses
4. A minimum of three reference letters from individuals you have worked or volunteered for that are not related to the applicant

By signing below, the applicant certifies that all information provided is true and accurate. Further, the applicant authorizes Valley Hospital Association, Inc. to verify this information by contacting all listed individuals and institutions.

Signature of Applicant _____

Date _____

Signature of Parent Or Guardian _____
(if the applicant is a minor)

Date _____

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Candidate Qualifications

- 1 A high school senior seeking, or currently enrolled in, higher education at any level in any health care field.
- 2 Matanuska-Susitna Borough residency.

Candidates for the Vivian Shaver scholarship may not be employees, members of the medical staff or the Joint Venture Board of Directors, Joint Venture Board of Trustees, Valley Hospital Association Board or Valley Hospital Foundation or subsidiaries.

Scholarship Distribution Procedure

Funds will be distributed to successful applicants through the registrar of their educational institution and may be applied towards tuition, fees, books and supplies only. Remaining balances are to be carried over for future educational expenses on behalf of the recipient.

Scholarship Intent

To encourage and support the educational development of the youth of the Matanuska-Susitna Borough who are interested in entering the health care field.