

## Scholarship Program Eligibility and Requirements - 2025

To encourage academic preparation in the field of health care, Hawthorn Medical Associates is offering 13 scholarships of \$2,000 each for high school seniors who will pursue education in the human health care field. Students from the following schools are encouraged to submit an application:

- · Apponequet Regional High School
- · Bishop Stang High School
- Dartmouth High School
- · Fairhaven High School
- Global Learning Charter School
- Greater New Bedford Regional Vocational Technical High School
- Nazarene Christian Academy
- · New Bedford High School
- Old Colony Regional Vocational Technical High School The William Holliday III, MD, Memorial Scholarship
- Old Rochester Regional High School
- Westport High School

#### Student must be:

- · A high school senior, graduating in 2025;
- Pursuing further education full-time from any accredited program in the United States during the 2025 – 2026 academic year;
- Pursuing one of the following majors or areas of study: nursing; pre-med; radiological technology; laboratory sciences; occupational therapy; pharmacy; physical therapy; respiratory therapy; certified medical assistant; or other human health related field.

### Applicant must submit:

- · Signed, completed application form;
- Official transcript from high school currently attending including senior grades to date and class rank
- A short essay (no more than one-page) describing:
  - reason for pursuing the particular area of study/career plans
  - academic accomplishments
  - employment or volunteer activities related to your chosen area of study
  - financial issues that could be an obstacle to pursuing study
- Two reference letters from non-family members (one must be an academic reference)
- · Proof of acceptance into an accredited education program

## Applications must be received at Hawthorn Medical no later than April 18, 2025.

Submissions should be mailed to:

Marketing Department Hawthorn Medical Associates 535 Faunce Corner Road No. Dartmouth, MA 02747

Emailed applications cannot be accepted. Scholarship awards will be sent to the college/university after student provides a copy of their tuition bill. If a scholarship recipient makes a substantial change to the school or area of study listed on their application, it may result in forfeiture of the scholarship. Questions should be directed to Kathleen Murray  $\sim 508$ --961-2571.



# Application for Hawthorn Medical Associates Scholarship

Name:			
Address:			
City/Town:		Zip:	
Telephone:			
Do your have a relative who works at Hawthorn Medico Relative's Name:		Relationship:	
HIGH SCHOOL currently attending:			
Name of Guidance Counselor:			
SCHOOL/COLLEGE you will attend in the fall of 2025:			
City:	State:		
Major or area of study:			
Are you eligible for free or reduced tuition at this s	chool?		
EXTRACURRICULAR ACTIVITIES			
List any activities that you have participated in during hi	gh school. This may includ	le community service, clu	bs, sports, etc. No cover letter,
resume or attachments please - select the most relevan	nt activities and list here.		
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EMPLOYMENT HISTORY			
List any employment during the past two years.			
Employer:	=		
Type of Job:		from	to
Employer:			
Type of Job:		from	to
The above statements are true to the best of my knowledge. I underst			
be returned. I understand that if I do not complete the application pro- understand that if I am awarded a scholarship but make a substan	cess or if my application is receive	ed after April 18, 2024, I am n	ot eligible for consideration. I also