

BATON ROUGE GENERAL MEDICAL CENTER FOUNDATION SCHOLARSHIP PROGRAM

Baton Rouge General Medical Center's Foundation scholarship program was founded in 2013 through the You, Me and BRG Employee Giving Program. The scholarship program was created to assist children of employees of General Health System in obtaining post-high school education in health-related courses of study.

Scholarships are available on an annual basis in the amount of \$2,000/\$1,000 per semester and may be used at an accredited college, university, or vocational/technical school.

The **deadline** to submit applications for the Fall of 2014 is Thursday, May 15, 2014 at 5:00 p.m.

Completed applications can be mailed to the address below or hand delivered to the Foundation office located at the Bluebonnet campus.

Baton Rouge General Medical Center Foundation 8595 Picardy Ave., Box 410 Baton Rouge, LA 70809

Before you send in your scholarship application be sure all required documentation is completed and included. Please note that a current authenticated transcript is required. An official at your school must sign your transcript. Any incomplete or illegible application will not be accepted.

Applicants will be notified by mail in May regarding the status of their application.

If you have any questions about the scholarship program please call (225) 763-4372.

BATON ROUGE GENERAL MEDICAL CENTER FOUNDATION SCHOLARSHIP PROGRAM RULES AND ELIGIBILITY

I. Purpose

Baton Rouge General Medical Center's Foundation scholarship program is available to assist children of employees of General Health System in obtaining post-high school education in health-related courses of study. By offering scholarships to the children of GHS employees, the Foundation provides employees with an opportunity to contribute to a fund that will benefit their co-workers and encourage individuals to pursue careers in healthcare.

II. Policy

Baton Rouge General Medical Center's Foundation (the "Foundation") shall award scholarships on an annual basis to the children of employees who are pursuing health-related courses of study. **Such scholarships shall be in the amount of \$2,000 payable \$1,000 per semester**. Scholarships may be used at an accredited college, university, or vocational/technical school. Scholarships shall be awarded competitively based on applicant merit *[and need]*, without reference to race, sex, religion, national origin, or physical handicap. Scholarships are not intended to constitute compensation for past, present, or future services, nor as an inducement to accept future employment. An application process shall be undertaken annually, leading toward the selection of one recipient in the spring of each year.

III. Procedure

To qualify as the child of an employee, applicants must be the:

- Natural child of an employee;
- Legally adopted child or legal ward of an employee;
- Stepchild of an employee whose spouse has legal custody of the child;
- Stepchild of an employee whose spouse has primary responsibility for their financial support.

Eligibility

- The employee family member (of the applicant) must be regular part-time who has worked at least 1,250 hours in the prior 12 months or full-time with at least one year of service at the time of the application.
- The child applicant must be:
 - Unmarried
 - Less than 24 years of age
 - Resident of Louisiana
 - Either accepted into or currently enrolled in a health-related curriculum at an accredited college, university or vocational/technical school during the academic year for which the scholarship is given.

Application Process

- Applicants shall complete a Baton Rouge General Medical Center Foundation scholarship application. The applicant is responsible for gathering and submitting all information and forms necessary to be eligible for selection.
- Applicants must submit the completed application, along with a current authenticated transcript of their grades, to "Baton Rouge General Medical Center Foundation, 8595 Picardy Ave., Box 410, Baton Rouge, LA 70809.
- All applications must be postmarked on or before the scholarship deadline.
- Foundation representatives shall treat all applications as confidential.

Selection of Recipients by the You, Me & BRG Committee

- All scholarship applications shall be reviewed by the You, Me & BRG Committee.
- Scholarships shall be awarded on the basis of merit, with consideration also given to community service. The academic, extracurricular and employment accomplishments of each applicant shall be evaluated and scored according to pre-established criteria. Consideration may also be given to the individual character and motivation of applicants, as revealed in their written applications, letters of reference, or other circumstances.
- If an application is received from an applicant who is related to (parent, grandparent, child, grandchild, sibling or in-law) any officer or director of General Health System, physician on the medical staff, referring physician to any General Health System entity, or anyone who has made substantial donations to the Foundation in the past five years, utmost caution shall be taken to ensure that the application is reviewed based solely on the merit of the applicant. If, based on all facts and circumstances, the application cannot be viewed without improper bias or influence (whether actual or perceived); the Committee shall decline to consider the application and shall notify the applicant accordingly.
- If an application is received from an applicant who is related to a member of the selection committee, under no circumstances shall such Committee member participate in or be present for the review, discussion or consideration of such application.
- Scholarship applicants shall be notified of the outcome in writing.
- Any applicant not selected in one year may reapply in any later year for which he or she is eligible.

Disbursement of Scholarships and Accounting

- Scholarships may be applied toward tuition, fees or books, as designated by the scholarship recipient. Scholarship amount may not be applied toward room, board, or incidental living expenses.
- Scholarships awarded shall be forwarded by the Foundation directly to the school. In all other respects, scholarship funds shall be handled in a consistent manner.
- Any tax issues associated with the scholarship shall be handled by the Accounting Department.

Renewals for Subsequent Years

- Depending on the particular scholarship awarded, recipients may in some cases qualify for additional scholarship awards for successive academic years until the course of study or degree program for which the application was made has been completed. Students must re-apply in order to be considered for a renewal scholarship.
- A maximum of four scholarship awards shall be granted to any one student. Awards shall be granted for undergraduate study only.
- Renewal of a scholarship during the term of an educational program shall require the recipient to maintain a grade point average of 3.0 on a 4.0 scale and shall further require the recipient to remain in good academic and disciplinary standing.
- If a recipient ceases to be enrolled at the designated school while the award is in effect, a pro rata portion of the scholarship awarded must be returned, based on the portion of the academic year remaining (to the extent feasible based on the school's tuition refund policy).
- The recipient must remain in pursuit of a health-related course of study.

BATON ROUGE GENERAL MEDICAL CENTER FOUNDATION SCHOLARSHIP PROGRAM APPLICATION

PLEASE TYPE OR USE BLACK PEN

Before completing this application, applications must read the eligibility requirements.

This completed application and all supporting documents must be submitted to the Baton Rouge General Medical Center Foundation, 8595 Picardy Ave., Box 410, Baton Rouge, LA 70809, <u>no later than 5:00 p.m. Thursday, May 15, 2014.</u>

| 2014 BATON ROUGE GENERAL MEDICAL CENTER FOUNDATION SCHOLARSHIP | | | |
|---|---------------------------------|---|---|
| APPLICATION | | | |
| Last Name: | First Name: | M.I. | Home Phone #: |
| | | | |
| Address: | | City: | State & ZIP Code: |
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| Dependent of Baton Rouge General Medical Center | First & Last Name of GHS Er | nployee: | Department: |
| (Check One) | | | |
| Yes No | | Address Ott, Otata 8 71D Oc | de ef Oekeel Ourreethu |
| Name of High School/Community College/College or University You Are Currently Attending: | | Address, City, State & ZIP Code of School Currently Attending: | |
| | | | |
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| Cumulative Unweighted GPA | .: | SAT I: (High School Seniors MUST attach a | OR ACT Composite: (High School Seniors MUST |
| | | сору) | attach a copy) |
| | | | |
| | | (Verbal) (Math) | |
| List three schools you have s already been accepted. | ubmitted an application for Fal | 2014. Place an asterisk (*) ne | ext to the school(s) you have |
| 1. | | | |
| 2. | | | |
| | | | |
| 3. | | | |
| Anticipated Major of Field of | Study in Fall 2014 | | |
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SCHOOL ACTIVITIES (Attach additional pages if needed)

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|------------------------|------------------------------|--------------|----------------|--------------|
| Position, Activity, or | Responsibilities or Position | Average Hrs. | From: Mo./Year | Was this |
| Organization | Held | / Week | To: Mo./Year | Required for |
| Organization | i leiu | / WEEK | 10. W0./Teal | |
| | | | | School or |
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COMMUNITY ACTIVITIES / VOLUNTEER EXPERIENCE (Attach additional pages if needed)

| Position, Activity, or Organization | Responsibilities or Position Held | Average Hrs. / Week | From: Mo./Year To: Mo./Year | Was this Required for School or Graduation |
|--|--------------------------------------|------------------------|--------------------------------|---|
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LETTERS OF RECOMMENDATION

Three letters of recommendation must be submitted with this application to give judges a fuller picture of the applicant's academic and leadership accomplishments. One letter should be from an academic school teacher, one from a principal, counselor, or advisor, and one from someone familiar with the applicant's community service. Letter should be on letterhead of the institution (where appropriate) and must contain the person's printed name and title. Please complete the following for each person who has submitted a letter of recommendation:

| complete the following for each person | complete the following for each person who has submitted a letter of recommendation. | |
|--|--|--|
| 1. Academic Teacher's Name: | Phone Number or E-mail: | Length of Time Recommender Has Known Applicant: |
| Principal, Counselor, or Advisor's Name: | Phone Number or E-mail: | Length of Time Recommender Has Known Applicant: |
| 3. Volunteer or Community Service Name: | Phone Number or E-mail: | Length of Time Recommender Has Known Applicant: |

PERSONAL AUTOBIOGRAPHICAL ESSAY:

- Attach a person autobiographical essay not to exceed 500 words.
- Essay is to be typed and double-spaced with a 12-point font, two pages maximum.
- Your essay should include information about your future career goals.
- If you have any special circumstances or family responsibilities we should be aware of, please include these in your essay.
- **DO NOT** submit any other materials (photos, newspaper clippings, scrapbooks, etc.). They will be discarded and not returned.

CERTIFICATION:

| All of the information on this form is true and complete to the best of our knowledge. If asked by Baton Rouge General Medical Center Foundation, we agree to give proof of the information that we have given on this application. We realize that if we do not give proof when asked, the student will not be considered for a scholarship. | | |
|---|-------|--|
| | | |
| Signature of Applicant: | Date: | |
| | | |
| | | |
| Signature of Parent/Guardian: | Date: | |

| APPLICATION CHECKLIST: (All of the following must be submitted in ONE application packet – failure to include any of the following items will automatically disgualify the applicant from consideration). |
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| Completed and signed Baton Rouge General Medical Center Foundation Scholarship Application (Typed or |
| Black Ink) Three Letters of Recommendation (Teacher, Counselor/Principal, Volunteer/Community) |
| Sealed Copy of High School or College Transcripts (or letters from school saying they have been mailed separately) [NOTE: If mailed separately, they must be postmarked NO LATER THAN Tuesday, May 13, |
| 2014] |
| Copy of SAT 1 or ACT Scores |
| Personal Autobiographical Essay |