

NORTH MISSISSIPPI HEALTH SERVICES

HEALTH CAREER SCHOLARSHIP APPLICATION – 2017

Deadline March 31, 2017

Name_____

Address_____

Telephone Number_____

School Currently Attending_____

Graduation Month and Year_____

College Planning to Attend _____ What Major?_____

Work History:

Employer_____

Dates of Employment_____

Extracurricular Activities (School or Community):

(Please list dates and briefly describe activity)

Please submit the following with this application:

1. A personal statement (approximately 200-500 words) expressing your beliefs and interests that addresses the following questions. (1) How do you feel about yourself? (2) What are your greatest strengths? Weaknesses? (3) What do you plan to do to improve your strengths and overcome your weaknesses? (4) What factors influenced your decision to choose a health career?
2. Two letters of reference (school, employer)
3. A copy of your high school transcript to include last semester grades

Please return completed packet to esmann@nmhs.net or fax to NMHS Human Resources Department at (662) 377-6221. Applications will not be accepted after deadline.