As part of our commitment to support quality healthcare for our community, the Auxiliary of Inova Fairfax Hospital offers healthcare scholarships to eligible persons to encourage and assist their pursuit of healthcare careers.

Based on merit, \$3,500 scholarships are awarded annually to students graduating from Fairfax County high schools who have been accepted by a full-time, accredited, healthcare career program.



Auxilary of Inova Fairfax Hospital
P.O. Box 487
Merrifield, VA 22116
P 703.776.6106

inova.org/auxiliaryIFHscholarship

## **Healthcare Scholarships**



Auxiliary of Inova Fairfax Hospital

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## To Qualify

To be considered eligible for the Auxiliary of Inova Fairfax Hospital Healthcare Scholarship program, you must:

- Be a graduating high school senior
- Have a high school grade point average of B (3.0) or better
- Currently attend school in Fairfax County or be a member of the Inova Fairfax Hospital Teen Auxiliary program
- Be accepted into a full-time, four-year, accredited healthcare career program.
   Such programs may include, but are not limited to:
  - Pre-med
  - Radiation technology
  - Laboratory technology
  - Pharmacy
  - Nursing
  - Health nutrition
  - Rehabilitation
  - Allied health fields



## To Apply

- Complete the application form included in this brochure. Additional forms may be obtained at www.inova.org/auxiliaryIFHscholarship. Call 703.776.6106 for assistance.
- Return the completed application to the Auxiliary of Inova Fairfax Hospital postmarked by May 1 of the year for which you are applying. Any applications postmarked after May 1 will not be considered.

## Include with the application

- A statement of interest in your chosen healthcare field and an explanation of how to plan and prepare for this career (200 words or less)
- Recommendations from a high school guidance counselor and a member of the teaching staff of your current high school
- A letter of acceptance from a full-time, four-year, accredited college or university
- High school transcript
- A list of your extracurricular activities and/or community service

Scholarship recipients will be notified in writing by the selection committee. A final scholarship payment will be made to the college or university once a tuition statement is provided to the Auxiliary Scholarship Committee. Please consider me for an Auxiliary of Inova Fairfax
Hospital Healthcare Scholarship. I understand this program
provides a one-time \$3,500 scholarship toward full-time
tuition at an accredited college or university.

		Please Prin
Name		
Address		
City	State	_ Zip
Email		
Telephone		
High School		
School Address		
City	State	Zip
School Telephone		
Date of Graduation		
I certify that I meet all the qualifications as outlined in this application for an Auxiliary of Inova Fairfax Hospital Healthcare Scholarship and that all information provided is true.		
Signature	D	)ate

The following information is enclosed:

- · High school transcript
- Letters of recommendation
- Letter of acceptance from an accredited college or university
- Statement of interest in healthcare career (200 words or less)
- A list of your extracurricular activities and/or community service

Return this form and accompanying information to:

Auxiliary Scholarship Committee Auxiliary of Inova Fairfax Hospital P.O. Box 487 Merrifield, VA 22116

Deadline for consideration for the scholarship program is May 1.