

David Page Career Advancement Scholarship

Application Packet • 2018
Fairview Scholarship Programs





Workforce Development
2344 Energy Park Drive
St. Paul MN 55108
Fax 612-672-7401

Dear Scholarship Applicant:

Thank you for your interest in the 2018 David Page Career Advancement Scholarship. We applaud your decision to further your education.

This application packet includes scholarship information and requirements, an application, and an applicant recommendation form. Please complete and submit all application materials by **4:30 pm Friday, June 22, 2018**. After all applications have been received, a scholarship review committee will evaluate the applications and select a recipient for this scholarship.

I look forward to receiving your application materials. If you have any questions, please contact me at hkachmal@fairview.org.

Best wishes,

Hanane Kachman

Workforce Development Consultant



INFORMATION & REQUIREMENTS 2018 | FAIRVIEW SCHOLARSHIP PROGRAMS

David Page Career Advancement Scholarship

Fairview is proud to offer the David Page Career Advancement scholarship to Fairview employees who have completed high school and/or earned a G.E.D. and will be entering or are currently enrolled in an accredited college or technical school program. These scholarships are for employees who are pursuing advancement opportunities within Fairview.

Eligible candidates for this scholarship are:

1. Current benefit-eligible employees with a good employment record.
2. High School graduates or equivalent.
3. Accepted and enrolled in an accredited college or technical school.
4. Completing a program that will help them qualify for positions that are expected to be available within Fairview. The program can be any level from certificate through doctorate.
5. Intend to continue employment at Fairview Health Services.

To apply

The applicant should submit the following application materials to Hanane Kachman, Fairview Workforce Development, 2344 Energy Park Drive, St. Paul MN 55108 by **4:30 pm Friday June 22, 2018**. **Incomplete, altered or late applications will not be accepted.**

- ❑ **David Page Career Advancement Scholarship Application Form** (included in this packet).
- ❑ **Current résumé**, including current and former employment, education and training, certifications, special skills, volunteer experiences and/or other professional experiences.
- ❑ **Copy of your educational transcripts** (an unofficial copy is acceptable).
- ❑ **Two professional recommendations. One recommendation must be from your current supervisor.** The other can be from your, class advisor or instructor, or another professional using the attached Scholarship Applicant Recommendation Form.
- ❑ **Documentation of acceptance/enrollment in an accredited college-level program.** If this documentation isn't available, please submit documentation showing proof of application to the program. If offered the scholarship, it will be dependent upon acceptance and enrollment into the program.

Note: This scholarship is considered taxable under Section 117 of the I.R.S. code. Please consult with a tax advisor if you have questions.

For further information regarding this or other Fairview scholarships, please contact Hanane Kachman at hkachma1@fairview.org. Fairview's Workforce Development Department will notify the scholarship recipient in writing.



SCHOLARSHIP APPLICATION FORM 2018 | FAIRVIEW SCHOLARSHIP PROGRAMS
David Page Career Advancement Scholarship

Name: _____ Person # _____

Address: _____
(House number and street) (City) (State) (Zip)

Phone Numbers: Home: (____) _____ Work: (____) _____

E-mail: _____

Employee Information:

Department Name: _____ Facility/Location: _____

Job Title: _____ Authorized Hours: _____ Hire Date: _____

Supervisor's Name: _____ Supervisor's Phone: (____) _____

The following is information about my school and program:

School name: _____ Degree program: _____

School address: _____

Semester/year that I started (or will start) the program: _____

Number of credits/classes remaining: _____ Anticipated graduation date: _____

Expected program expenses: _____

On a separate sheet and in your own words, please respond to the following questions. Answers must be typed/word processed. No handwritten essays accepted.

1. Describe your educational and your career goals.
2. Why you have chosen the health care industry to achieve these goals?
3. Why should we select you for this scholarship?

Signature: _____ Date: _____

SCHOLARSHIP APPLICANT RECOMMENDATION FORM 2018

David Page Career Advancement Scholarship

Dear: _____

I am submitting an application to Fairview in consideration for the David Page Career Advancement Scholarship. This application requires a letter of recommendation from a current employer, class advisor or instructor and/or another professional. My application will not be considered without this recommendation.

Would you please complete this recommendation form and return it to me in a sealed envelope? I must have my application materials to Fairview by Friday, June 22, 2018.

Thank you for your assistance.

Sincerely,

Signature of Applicant

Date

Name of Applicant (please print)

Phone

How do you know the applicant?

How long have you known the applicant?

Please describe the applicant's talents and strengths:

Please describe the applicant's areas for improvement:

(Continued)

(Recommendation Form Continued)



Applicant Name: _____

Please rate the applicant on the following attributes using a 5-point scale where 5 = excellent, 4 = very good, 3 = good/average, 2 = fair and 1 = poor: (Please select only one number for each category.)

	5	4	3	2	1	unsure
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates Fairview values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Career advancement potential at Fairview	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diversity awareness/appreciation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conflict management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation/initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment/follow-through	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress/crisis management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork/collaboration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to adjust to new situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use the following space to add any comments about the applicant’s professional skills, including their critical thinking abilities. You may include any other additional information that you feel would be helpful in evaluating this applicant for consideration for the scholarship.

Signature: _____ **Date:** _____

Name (print): _____ Title: _____

Address: _____

Phone: _____ E-mail: _____

Thank you for taking the time to submit a recommendation for this applicant. **Please return this form in a sealed envelope to the applicant. If you prefer to mail it directly, send it to: Fairview Workforce Development, Attn.: Hanane Kachman, 2344 Energy Park Drive St. Paul MN 55108.** If you have any questions, please contact Hanane Kachman at: hkachma1@fairview.org.

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Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Address: _____

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