



SOUTH DAKOTA HOSA SCHOLARSHIP APPLICATION

DESCRIPTION

Types:

1. The HOSA Scholarship Program is a program designed to award SD HOSA students who demonstrate high academic achievement, commit to community service, and demonstrate exceptional leadership skills.

Name of Scholarship	Amounts	Number Awarded
South Dakota HOSA Merit Scholarship	\$500	1
South Dakota HOSA Service Scholarship	\$250	2
Future Health Professionals Scholarship sponsored by Avera McKennan	\$500	1
Future Health Professionals Scholarship sponsored by Sanford Health	\$500	1
Future Health Professionals Scholarship sponsored by Regional Health	\$500	1

CRITERIA

1. Eligibility:

- a. This scholarship is available to a secondary senior student who plans to continue or further his/her education in the healthcare field.
- b. GPA of 3.0 or higher.
- c. The recipient is **REQUIRED** to attend the SLC in order to receive his/her award
- d. There is no limit to the number of applications per school.

2. Application completion

- a. The application must be grammatically correct, legible (word processed or neatly written) complete, and received by the deadline to be considered.
- b. All scholarship materials must be mailed together in one envelope. This includes letters of reference, transcripts, etc. Incomplete applications will not be considered.

3. Documentation

- a. Community service/volunteering
- b. Leadership/Extra-curricular activities
- c. Copy of transcript

4. Essay Requirements:

- a. The applicant must write a 300 word minimum essay answering the following questions:
 - i. “How has HOSA-Future Health Professionals been beneficial to your personal development?”
 - ii. “What are your future educational and professional goals?”

5. Letters of Recommendation Requirements:

- a. Two (2) written references are required. References should document the applicant’s character, leadership abilities, interpersonal skills, integrity, and potential in the health profession, and must be provided by any of the following:
 - i. A teacher, advisor, principal, or director
 - ii. Any other source other than a relative (healthcare professional strongly encouraged)

6. Screening and Award Announcement:

- a. The selection committee will make the final decision on scholarship awards. The winners of South Dakota HOSA scholarship awards will be announced at the SD HOSA state leadership conference (SLC).

7. Submitting Applications:

- a. Applications must be **RECEIVED no later than the published deadline**. Late arrivals will not be considered. **Scholarship applications are due in March and may be submitted along with state conference registration materials.**
- b. All scholarship materials must be mailed together in one envelope. This includes letters of reference, transcripts, etc. Incomplete applications will not be considered.
- c. Send application and all other attachments to:

**Brock Rops
SD HOSA State Advisor
1400 West 22nd Street
Sioux Falls, SD 57105**

8. Award Date:

- a. Scholarship money will be forwarded directly to the school, college, or university upon receipt of documentation verifying the recipient’s enrollment at that school, college or university. The student is responsible for contacting the SD HOSA state advisor with a mailing address.

SD HOSA SCHOLARSHIP APPLICATION FORM

NAME:		
HOME ADDRESS:		
TELEPHONE: ()	GRADE/YEAR:	
SCHOOL:	ETHNICITY:	
SCHOOL ADDRESS:		
CITY:	ZIP CODE:	
EMAIL ADDRESS:		
CAREER GOAL (health profession(s)):		
HAVE YOU BEEN ACCEPTED TO A POSTSECONDARY OR COLLEGIATE PROGRAM TO PURSUE YOUR EDUCATION AS OF THIS SUBMISSION?		Yes <input type="checkbox"/> No <input type="checkbox"/>
IF YES, PLEASE PROVIDE INSTITUTE NAME:		
IF NO, PLEASE INDICATE WHERE YOU HAVE APPLIED:		
LOCAL HOSA ADVISOR:		
Transcript Information: (20 points)		
Indicate Grade Point Average (GPA)		(on a 4.0 non-weighted scale)
(If in Honor's Program, please convert your GPA to a 4.0 scale)		
List of AP Courses:		

ATTACH the Following:

1.	ESSAY	<input type="checkbox"/>
2.	TRANSCRIPT	<input type="checkbox"/>
3.	DOCUMENTATION OF LEADERSHIP AND RECOGNITION ACTIVITIES	<input type="checkbox"/>
4.	DOCUMENTATION OF COMMUNITY/SERVICE INVOLVEMENT	<input type="checkbox"/>
5.	TWO LETTERS OF REFERENCE	<input type="checkbox"/>
6.	PHOTO IS OPTIONAL: Please attach a picture with the application to be used in press releases announcing the scholarship recipients.	<input type="checkbox"/>

Leadership Activities and Recognition (30 points)

List HOSA and OTHER school offices you have held, activities you have been involved in, and a clear statement of your leadership, responsibility and commitment for each. (If additional space is needed, attach a sheet of paper.)

Year	Office Held or Committee	Demonstrate leadership and record of participation in each activity

Community (Service) Involvement (15 points)

List of community activities (other than HOSA or school activities above) that you were involved and/or awards received. Also record number of hours involved in the activity (If additional space is needed, attach a sheet of paper).

Year	Organization Involved	Demonstrate leadership and record of participation in each activity	Hours

SD HOSA SCHOLARSHIP APPLICATION RATING SHEET

1. Transcript: 20 points maximum

GPA		10 points
Other (test scores, attendance, etc.)		5 points
Awards, honors or educational societies that indicate the quality of your academic performance.		5 points

2. Leadership Activities and Recognition: 30 points maximum

Evaluate the quantity and quality of activities in HOSA, other student and school activities, athletics, band, and other activities that require leadership skills.

HOSA Leadership		5 points
Quality of leadership activities, clear evidence of leadership, responsibility and commitment		10 points
Number and variety of leadership activities		10 points
Recognition and Awards		5 points

3. Community Involvement: 15 points maximum

Quality, quantity, duration and impact of community service activities		15 points
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4. References: 5 points maximum

Two well written references		5 points
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5. Essay: 30 points maximum

Clear and precise response of content with logical arrangement		15 points
Correct grammar, punctuation, spelling, and acceptable business style		15 points

Totals: _____ / 100 points

Comments: