



**June E. Shaver Healthcare Scholarship  
Managed by RiverView Health Foundation**

*RiverView Foundation is honored to provide this regional health care scholarship program established in memory, honor, and respect of June E. Shaver's life values and commitment to serving others. In her professional career, June was a woman of high integrity, impeccable work ethic, and dedication. She was a strong and passionate leader, actively engaged in community service. She was a well-rounded woman of many interests. She valued self-motivation, high achievement, and the betterment of self.*



## **June E. Shaver Healthcare Scholarship 2020-2021 Application Guidelines**

### **Funding Guidelines:**

- Scholarship is restricted to applicants who have graduated from high school or now reside in one of the following regional rural communities in Minnesota: Crookston, Climax, Fertile, Mentor, Erskine, Red Lake Falls, Warren, Argyle, Stephen, Fisher, and East Grand Forks.
- This scholarship will be available annually as long as sufficient funding is available.
- Applicant must be a high school graduate who has completed at least one full semester at a post-secondary higher education institution, is enrolled in second semester, AND is pursuing a degree in a **healthcare field**.
- A stipend of up to \$1000 will be awarded to each year's scholarship recipient. The check will be mailed directly to the institution of recipient's choice. Recipient will receive the stipend through the financial aids office of that institution. It is to be applied toward the cost of tuition or related educational expenses.
- Recipient may re-apply annually.
- Financial need may be considered in awarding the scholarship, but is not an eligibility requirement.

### **Application Procedure:**

- An application form is available through Riverview Foundation Office and online at [www.riverviewhealth.org](http://www.riverviewhealth.org). You may call 281-9249, e-mail [rschoenborn@riverviewhealth.org](mailto:rschoenborn@riverviewhealth.org), or stop at the Foundation Office to obtain this form.
- To submit an application, please complete all information requested on the form.
- Applicant must meet eligibility requirements.
- Submit completed application form, a copy of your current transcript, your resume and two (one-page) letters of recommendation by **noon on April 15, 2020**. You will be contacted if more information is needed.

### **Awarding of the Scholarship:**

- A Scholarship Review committee of **4-8 members** will review and evaluate scholarship applications.
- Successful candidates will be judged on personal attributes, aspirations, quality of character, as well as demonstrated commitment to his/her healthcare field of study. Applicants are encouraged to submit a well-managed and detailed application.
- Scholarship award check will be issued prior to starting date of applicant's next school term. (Issue date to be arranged between Foundation Office and recipient.)

**June E. Shaver Healthcare Scholarship  
Application for the 2020-2021 Academic Year**

Type or print neatly:

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

Current GPA: \_\_\_\_\_ E-mail: \_\_\_\_\_

Post-Secondary or higher institution in which I am enrolled:  
\_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Healthcare field of study I plan to pursue: \_\_\_\_\_

Current year /status in your healthcare program: \_\_\_\_\_

Please Attach:

- Completed Application Form with attached essay question responses
- A copy of your current grades transcript and course history
- A resume including education, community involvement, extra-curricular activities, specific honors or recognition received, offices or positions of leadership held, and a summary of work experience (*Please be thorough.*)
- **Two (one-page) letters of recommendation are required:** Letters will be accepted from work, educational, church and/or community involvement references. One of the letters may be from an educational reference, but is not required

Submit application and attachments by noon on April 15, 2020 to:

**RiverView Healthcare Foundation  
c/o Randy Schoenborn  
323 S. Minnesota St.  
Crookston, MN 56716**

## **June E. Shaver Healthcare Scholarship Application for the 2020-2021 Academic Year**

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**Please answer the following three essay questions:**

*\*\* Please, answer on a separate piece of paper - no more than 500 words for each question. \*\**

**1. June was an individual who knew both what she did and did not want in her career choice. Please share with us what you want and/or do not want in a career.**

*"[June] didn't really plan on being a medical clinic administrator but she was fortunate enough to be in the right place at the right time. There were only three things she did not want in a job. She did not want a job that wasn't a challenge. She did not want a job that didn't pay well. And, she did not want a job that had no future."*

- Excerpt from an article about June's life

**2. You have many strengths and attributes – what are three strengths that you recognize in yourself that you will bring to the healthcare field?**

**3. Please share with us what lead you to this field of healthcare. (Ex: a personal experience, a work or educational opportunity, a person who influenced you, etc.)**