2023 TidalHealth Nanticoke Scholarship Program

TidalHealth Nanticoke offers several scholarships for graduating high school students who live in Western Sussex County and pursue careers in healthcare. Each scholarship has a unique focus: Diversity in Healthcare, Jill Hickman Nursing Scholarship, and Healthcare Careers. Students may apply for multiple scholarships; this application will be used for all three. Applicants are evaluated based on the criteria in this application, and compete on the below criteria for a limited number of TidalHealth Nanticoke scholarships awarded annually:

Academic Merit Scoring Criteria	Points
Academic Achievement	30 points
Essay	25 points
Extracurricular activities, both school-related and community service	25 points
Two recommendation letters	10 points
	(5 points each)
Previously volunteered at TidalHealth (formerly Nanticoke Memorial Hospital)	10 points

<u>Criteria</u>

- Graduating high school senior living in the following areas of Western Sussex County:
 Seaford, Laurel, Bethel, Bridgeville, Greenwood, Georgetown or Delmar
- Student must be accepted into a healthcare-related program at an accredited college or university
- Academic achievement is evaluated by using unweighted GPAs on a 4.0 scale
- Completion of a 100-word or more essay on the following topic: "Describe what area of healthcare you are interested in and why." The submitted essay must be typed in double spaced Times New Roman 12-point font. The Scholarship Committee scores on the following: directions, grammar, essay structure, analytical skills, conclusions drawn and the "why" part of the essay
- Submit two (2) letters of reference from teachers, counselors, principal or community member who can attest to the student's desire to learn and likelihood to excel in the chosen course of study

Please submit the following:

- A completed application
- Copy of current transcript
- Copy of your acceptance letter into a healthcare-related program at an accredited college or university
- Completed typed essay
- Two (2) letters of reference

The attached application applies to the following scholarships:

- <u>Diversity in Healthcare Scholarship</u> The TidalHealth Diversity Scholarship focuses on broadening the number of professional in healthcare from traditionally underrepresented backgrounds in Western Sussex County. The program is for Black/African American, Hispanic/Latino and/or Native American students.
- Jill Hickman Nursing Scholarship The Jill Hickman Nursing Scholarship is for graduating high school students who pursue careers in nursing.
- Healthcare Education Scholarship The TidalHealth Healthcare Education Scholarship
 is for those pursuing <u>any</u> healthcare career such as Nursing, Pharmacy, Physical
 Medicine, Respiratory Therapy, Medical Lab Scientist, to name a few.

Applicants selected have an opportunity to receive a scholarship in amounts ranging from \$1,000 - \$2,500.

All application materials listed above must be received by **April 17**, **2023**. Applications can be submitted electronically to Lori.Lee@tidalhealth.org or mailed to:

TidalHealth Nanticoke, c/o Lori Lee, Workforce Development Program Manager, People Dept., 801 Middleford Road, Seaford, DE 19973

2023 TidalHealth Nanticoke Scholarship Program Application

Place a check mark by all scholarship(s) you are applying for: Diversity in Healthcare Scholarship – The TidalHealth Diversity Scholarship focuses on broadening the number of professional in healthcare from traditionally underrepresented backgrounds in Western Sussex County. The program is for Black/African American, Hispanic/Latinx and/or Native American students.			
Jill Hickman Nursing Scholarship – The Jill Hickman Nursing Scholarship is for graduating high school students who pursue careers in nursing.			
Healthcare Education Scholarship -for those pursuing any healthcare career such as Nursing, Pharmacy, Physical Medicine, Respiratory Therapy, Medical Lab Scientist, to name a few			
Student Information			
Name:			
Address:			
Home Phone No. ()	_ Cell Phone No. ()		
Student Email:			
High School Information			
Contact:	Title:		
Address:			
Phone Number: ()			
Anticipated Date of HS Graduation:			
Type of H.S. Degree/Cert			
Desired Career in Healthcare:			
College/University Information			
Name of Institution Attending:			
Address:			
Institution Contact Name	Danastera auto		
Institution Contact Name:	Department:		

Phone Number of Institution	n: ()	
Date/Semester Planning to	Attend:	
Extracurricular Activities		
TidalHealth Nanticoke (form	ner Nanticoke Memorial Hospital/Physician Netwo	ork) Volunteer Services
I have volunteered at Tidall	Health Nanticoke Yes No	
If yes: What year(s)	did you volunteer:	
Extracurricular Activities:	Volunteer/Community service and offices hel	ld
(If you have more than the s	space allows attach a separate sheet titled "Schoo	ol Activities")
Activity	Role/Position in Activity	Years Particip
Activity	Role/Position in Activity	Years Particip
Activity	Role/Position in Activity	Years Particip
Activity	Role/Position in Activity	Years Particip
Activity	Role/Position in Activity	Years Particip
	Role/Position in Activity Volunteer/Community service and offices hel	
Extracurricular Activities:		ld
Extracurricular Activities: (If you have more than the sactivities")	Volunteer/Community service and offices hel	ld
Extracurricular Activities:	Volunteer/Community service and offices hel	d unteer/Community

2023 TidalHealth Nanticoke Scholarship Program Application

Acknowledgment and Signature

I hereby apply for a scholarship being offered by TidalHealth Nanticoke for the academic year beginning **Fall 2023**. In applying for a scholarship, I authorize the Scholarship Committee to review my scholastic record, to interview any of my present or past teachers, guidance counselors, or other school officials, and current or past employers to provide information regarding my scholastic achievement, character, and dependability.

Applicant's Signature	Date
and assure certain obligations imposed thereafter.	
If selected, parents or legal guardian will be require and assure certain obligations imposed thereafter.	ed to sign and enter into the Scholarship Agreement
I understand that if I am awarded a scholarship, I w	vill be required to sign a Scholarship Agreement.
character, and dependability.	