



## **JAMES BOGAN HEALTH ADMINISTRATION SCHOLARSHIP**

The Portage Health Foundation (PHF) is proud to award the James Bogan Health Administration Scholarship to a deserving resident of Baraga, Houghton, Keweenaw or Ontonagon counties of Michigan. PHF will award one (1) \$5,000 scholarship each year. It is the intention of PHF that the awarding of this scholarship will assist the individual student with the financial costs and burden associated with pursuing a Master's level program that will help advance their careers in the health care sector.

The scholarship applicant must meet the following criteria to apply and be considered for funding.

### **Eligible Criteria:**

- The student must be enrolled/accepted into a Master's level program in an accredited institution/program of education;
- Acceptable programs include a Master's in Business Administration, Master's in Public Health, Master's in Health Administration, Master's in Public Administration; or Master's in Non-profit Administration.
- Proof of acceptance must be provided with the application;
- The student must have at least a 3.0 GPA or meet the education institution's minimum GPA and academic requirements for maintenance in the enrolled program;
- The student must be a resident of the four-county area identified above. To prove residence, applicants are requested to provide a copy of driver license and voter registration card with the application;
- The student must be intending to maintain or advance their career within a health-related occupation/administration opportunity;
- The student must submit a cover letter and accompanying essay in support of their application.

## JAMES BOGAN HEALTH ADMINISTRATION SCHOLARSHIP APPLICATION

*A form-fillable application may be downloaded at [www.phfgive.org/scholarships](http://www.phfgive.org/scholarships)*

Date: \_\_\_\_\_

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

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

Mailing Address: (if different): \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Undergraduate Degree: \_\_\_\_\_

Undergraduate Degree Granting Institution: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Current Occupation/Position: \_\_\_\_\_

School(s) accepted for admission (must include proof of acceptance and program)

\_\_\_\_\_

Accreditation Body: \_\_\_\_\_

Intended Degree: \_\_\_\_\_

**Please prepare a short cover letter and essay that addresses the following questions:**

- Why do you want to continue your education?
- What do you hope to accomplish academically while continuing your education?
- How do you hope to use your education once you have completed your training?
- What problem do you want to solve by continuing your education?
- How do you imagine that your career can be used to help advance the charitable needs of our community?
- How will your advanced education better position you to be a leader in the community?
- How does your ongoing education relate to the Portage Health Foundation's mission or its seven targeted areas of emphasis?

**Important Dates:**

- The student must submit a completed application to the Portage Health Foundation by **June 18, 2021**. Incomplete applications will not be considered.
- The PHF Grants Management Committee will anonymously review the finalist applications and make the award selection. PHF will mail award letters on or before **July 12, 2021**.