



**CAVALIER COUNTY MEMORIAL HOSPITAL FOUNDATION  
SCHOLARSHIP APPLICATION**

Application # \_\_\_\_\_

1. In 100 words or less, describe your desired area of study in a medical field, and explain why you have the desire to pursue that area in the medical field.

2. What high school courses have you taken to support your desired career?

3. List all your activities, volunteer work, organizations, work and offices held either through school, church or work related jobs. Select the one activity or job that has most aided your development and describe how it has done so.

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4. List the name of the educational institution, the date you plan to enroll and why you have selected this institution.

5. How do you plan to finance your college education?

6. Explain why to have a desire to pursue that area.

**STATEMENT OF NON-DISCRIMINATION**

It is the policy of Cavalier County Memorial Hospital Foundation to prohibit discrimination on the basis of race, color, religion, sex, national origin, or disability.