

SLAMAN FAMILY MEMORIAL SCHOLARSHIP

Application Procedure

INTRODUCTION: The Slaman Family Memorial Scholarship was established in July 1991 by Sam and Karen Slaman in honor of two women. It is in memory of Elizabeth Slaman, mother of Sam, and Antoinette "Toni" Nichols, mother of Karen. Both were patients at the former Boscobel Area Health Care (BAHC) Hospital and residents at the former BAHC Nursing Home. The creation of a scholarship in their honor symbolizes the family's concern and sensitivity for rural health care as well as their appreciation for those who provide immediate patient care in the hospital and nursing home facilities located in Boscobel. Therefore, this scholarship was established for employees of the current Gundersen Boscobel Area Hospital and Clinics (GBAHC) and their spouses or legal dependents.

PURPOSE: The focus of the scholarship is to encourage individuals to pursue a post-secondary education in Nursing. Primary scholarship consideration shall be given to individuals who intend to enroll in the Certified Nursing Assistant Program, Licensed Practical Nursing Program, or Associate Degree Nursing Program at Southwest Wisconsin Technical College, Fennimore, Wisconsin, or other colleges upon approval of the scholarship committee.

In the event primary program applicants do not meet scholarship criteria or there are no qualifying primary program applicants, secondary scholarship consideration shall be given to advanced nursing degree programs (i.e., bachelor's degree in nursing, master's degree in nursing). Both primary and secondary scholarship applicants must meet the criteria as defined in the Eligibility and Qualifications section of the Application Procedure.

DISTRIBUTION: The amount and number of scholarships will be determined annually. Scholarship funds will be disbursed upon satisfactory completion of either (1) the Certified Nursing Assistant Program and certification exam, or (2) one semester of enrollment at Southwest Wisconsin Technical College (SWTC) or a college of higher learning in a nursing program as stipulated in the scholarship Purpose. Payment for either a full-time or part-time recipient will be made after a copy of the completed grade results or proof of certification (CNA) has been submitted from an accredited institute and reviewed by the committee, demonstrating compliance with these requirements. The distribution process shall apply to both primary and secondary program applicants.

Nursing Assistant Students: Recipient must have completed an approved CNA program as outlined by the State of Wisconsin and passed the required certification exam to be eligible for distribution of scholarship funds.

Full-Time Nursing Students: Recipient must have completed a full-time course load (i.e., 12 credits) for the enrolled semester and have a minimum GPA of 2.5, based on a 4.0 scale, for the enrolled semester to be eligible for distribution of scholarship funds.

Part-Time Nursing Students: Recipient must have completed 6-11 credits in a Nursing Program with a minimum GPA of 2.5, based on a 4.0 scale, for the enrolled semester to be eligible for distribution of scholarship funds. Credit requirements may be waived for the final semester.

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Application Procedure (continued)

APPLICATIONS: Applications are available through the Administration Office at Gundersen Boscobel Area Hospital and Clinics and on the GBAHC website under the “Patients & Visitors” tab at gundersenhealth.org/locations/boscobel/patients-visitors/scholarships

APPLICATION PACKET TO INCLUDE THE FOLLOWING:

1. Completed application form. *Incomplete forms will automatically be disqualified from the selection process.*
2. Official transcripts or other final student academic records showing GPA.
3. Two (2) letters of recommendation (dated within 12 months of application).
4. First-time applicants must submit a letter of acceptance from SWTC or another college.
5. Application materials must be mailed with a postmark no later than March 15.

ELIGIBILITY AND QUALIFICATIONS FOR PRIMARY AND SECONDARY APPLICANTS:

1. The application deadline shall be March 15 of each academic year. Individuals may reapply each year if they have maintained an overall GPA of 2.5, based on a 4.0 scale.
2. This scholarship was established for employees of Gundersen Boscobel Area Hospital and Clinics and their spouses or legal dependents.
3. Scholarship applicants will receive consideration without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability or protected veteran status.
4. The recipient(s) of the scholarship shall possess above-average potential for success in his/her chosen field as indicated by past academic achievement, past employment record, community involvement, or other conditions suitable to the selection committee.
5. Applicants being considered for the scholarship who are first time enrollees (entering their first semester of coursework or entering an approved program for the first time) must submit a letter of acceptance from Southwest Wisconsin Technical College (SWTC) or the college of anticipated attendance.
6. This scholarship is not based solely on academic achievement. Overall merit is also taken into consideration. Applicants must have maintained an overall GPA of 2.5 or greater in prior academic studies, including high school studies.
7. A scholarship for both full-time and part-time students will be available each year. The amount awarded will be determined yearly.

Nursing Assistant Students: Recipient must have completed an approved CNA program as outlined by the State of Wisconsin and passed the required certification exam to be eligible for distribution of scholarship funds.

Full-Time Nursing Students: Recipient must have completed a full-time course load (i.e., 12 credits) for the enrolled semester and have a minimum GPA of 2.5, based on a 4.0 scale, for the enrolled semester to be eligible for distribution of scholarship funds.

Part-Time Nursing Students: Recipient must have completed 6-11 credits in a Nursing Program with a minimum GPA of 2.5, based on a 4.0 scale, for the enrolled semester to be eligible for distribution of scholarship funds. Credit requirements may be waived for the final semester.

SLAMAN FAMILY MEMORIAL SCHOLARSHIP APPLICATION

Name: _____
Last First Middle or Maiden Name

Address: _____
Street

City, State, Zip Code

Telephone Number

College: _____ Semester & Year: _____
(Example: MM/YYYY or Semester/YYYY)

Full-time and Part-time Nursing Students:

Academic program you are enrolled in: _____

Number of anticipated summer credits: _____

Number of anticipated fall credits: _____

Status: Part-time _____ Full-time _____

CNA Applicants Only:

Course date: _____ Number of credits enrolled in: _____

Anticipated Certification Date/Course End Date: _____

List school activities in which you have participated (i.e., Music, Athletics, FFA, FHA, etc.).
If necessary, one additional sheet may be attached.

SLAMAN FAMILY MEMORIAL SCHOLARSHIP APPLICATION (continued)

List community/church/civic clubs/local or state offices held or other out-of-school activities in which you have participated. If necessary, one additional sheet may be attached.

State your employment experiences, future goals and plans (profession, career, vocation, employer, etc.). If necessary one additional sheet may be attached.

ELIGIBILITY (Check all that apply)

I am _____ an employee of GBAHC

Department

_____ a spouse of an employee of GBAHC

Name of employee

_____ a legal dependent of an employee
of GBAHC

Name of employee

Applicant's signature: _____ Date: _____

SLAMAN FAMILY MEMORIAL SCHOLARSHIP APPLICATION (continued)

LETTERS OF RECOMMENDATION:

All applicants must submit two (2) letters of recommendation dated within one year of application. Please enter the names and contact information below for office reference. (Examples: Include current employer or supervisor, past employer or supervisor, instructor, member of the clergy.)

NAME	ADDRESS	EMAIL	PHONE
1.	_____		
2.	_____		

THE SLAMAN FAMILY MEMORIAL SCHOLARSHIP COMMITTEE:

The committee will consist of the Director of Inpatient Operations for GBAHC, one representative from the BAHC Foundation, and one representative from the Slaman Family. It will be the responsibility of this committee to review each application and make recommendations. If determined appropriate by the said committee, an interview may be necessary prior to the final recommendation.

Submit completed application material postmarked no later than March 15 to:

Foundation Director
Boscobel Area Hospital and Clinics Foundation
205 Parker Street
Boscobel, WI 53805
natollef@gundersenhealth.org