

# GRANT REHABILITATION & CARE CENTER

## LARKIN OURS SCHOLARSHIP AWARD

This \$2500 scholarship award is offered to one recipient each year that is a graduating high school senior in Grant, Hardy, or Pendleton County. The recipient must be entering a nationally certified nursing (RN) program in the state of West Virginia. Current employees of GRCC that have already graduated high school and are applying for a nationally certified nursing (RN) program may also apply for this award. All candidates must meet eligibility requirements.

### Eligibility:

- Must be a High School Senior in Grant, Hardy or Pendleton County; or previously graduated and currently employed at GRCC.
- Must submit High School and/or College credit transcripts.
- Must have 3.5 minimum GPA.
- Three letters of reference supporting your character, achievement, and potential for education and career advancement. One letter must be from a school official if applying as a high school senior. Other letters may be from employers, ministers, etc. Letters from family members are not accepted.
- Current GRCC employees must be in good standing which includes attendance and computer based educational requirements.

Scholarship funds will be awarded in the amount of \$1250 per semester for the first year to the award recipient. Recipient will maintain a 3.5 GPA and provide proof of GPA and acceptance and/or enrollment for first and second semester to qualify for award.

Applications may be obtained at Grant Rehabilitation & Care Center, our website and/or Facebook page, or from your high school Guidance Counselor.

[www.grantrehabilitationcarecenter.com](http://www.grantrehabilitationcarecenter.com)

All items must accompany application or application will not be considered.

Send your complete application packet to:

**GRCC SCHOLARSHIP COMMITTEE**  
c/o Kari Evans  
127 EARLY AVENUE  
PETERSBURG, WV 26847

*Submit complete application and signed letters of reference to Grant Rehabilitation & Care Center no later than 4:00 p.m. April 20, 2018.*

*No late entries accepted.*

**GRANT REHABILITATION & CARE CENTER**  
**LARKIN OURS SCHOLARSHIP AWARD**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of High School Attending \_\_\_\_\_

Graduation Date \_\_\_\_\_

Current employee: Y or N

Name of Parent(s) or Guardian(s) \_\_\_\_\_

Names of individuals providing letters of reference:

Phone number:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

List of Colleges/Universities to which you have applied:

Institution

Address

Status of Application

\_\_\_\_\_

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On a separate page, provide a typed personnel statement regarding your extracurricular community activities and achievements. Provide evidence of personal motivation and initiative. i.e.: civic club activities, church activity, volunteer groups, family assistance, etc. Include in your statement the reasons you are pursuing a career in nursing. (400-500 words).

**By submitting this application, I authorize my high school to make available to the Scholarship Committee of Grant Rehabilitation & Care Center information concerning my academic record and rank. It is understood that the award of this scholarship shall be governed by any and all conditions established by the committee.**

Applicant's Signature: \_\_\_\_\_

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