

Volunteer Services

Mary Johnson Scholarship Information

Submission Deadline: February 8, 2023, by 11:59 p.m.

The Mary Johnson Scholarship was established by the family of a volunteer. There is one scholarship for \$3,000 which will be awarded based on the following criteria:

- Be a resident of Arizona and enrolled in a nursing program at a metro-Phoenix area college or university. Must be currently enrolled in nursing program to apply.
- Cannot graduate from the Nursing Program prior to **December 2024**. Fund distribution is for Fall 2023.
- Submit a complete application, which will consist of:
 - The attached Mary Johnson Scholarship Application.
 - A **one-page** student statement that includes an overview of your goals, accomplishments, interests, and community services activities.
 - One letter of recommendation from a professional person, preferably in healthcare, not related to you who is acquainted with your work as stated in your student statement, not to exceed 1 page.
 - A copy of your college transcript showing participation in healthcare program. (Official or unofficial transcripts may be submitted)

Application Submission:

Your completed application should be submitted in one of the following manners:

By Mail: HonorHealth Volunteer Office
Attn: Scholarship Committee
250 E Dunlap Ave
Phoenix AZ 85020

By E-mail: Volunteers@HonorHealth.com
Subject line should read: Mary Johnson Scholarship Application

Additional Information:

All qualified applications received will be reviewed by the Scholarship Committee. Top candidates will be invited to attend an interview which is part of the selection process. Interviews are currently planned for late March 2023. Only those who attend the interview will be considered.

Mary Johnson Scholarship Application

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First Name: _____ **Last Name:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____ **Phone Number:** _____

Do you have a connection to HonorHealth? _____ **YES** _____ **NO** _____ **If yes, please explain:**

Name of Arizona College or University where scholarship will be used:

Name of college program currently enrolled in: _____

Cumulative GPA (from transcript): _____ **Anticipated Graduation Date:** _____

I confirm the following documents are attached:

_____ One-page response to prompt: *Why did you choose Nursing as your future profession and what strengths and characteristics do you have that will help you become successful in your chosen career?*

_____ Letter of recommendation no more than one-page in length

_____ Current college transcript (official or unofficial)

For Office Use Only:

DATE & TIME APPLICATION RECEIVED: _____

BY: _____

_____ 1-Page Applicant Cover Letter _____ Letter of Reference

_____ Transcript

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