Archbold Auxiliary

Dear Guidance Counselor:

Please find enclosed scholarship applications for students pursuing a degree in a medical profession at a college, university, or technical school. Please feel free to make copies and distribute them to students who are high school seniors, that meet the requirements, and who live in Archbold service areas which are: Thomas, Brooks, Grady, and Mitchell counties. Each scholarship has different requirements and policies. A student may apply for as many scholarships as he/she chooses. Make sure that all required information is included with the application before submitting it/them to the Auxiliary Committee.

The scholarships that are available for this 2027-2028 school term are as follows:
Archbold Memorial Hospital Auxiliary Scholarship (local)

All scholarships are paid directly to the institution of higher learning where the scholarship recipient has been accepted. There is no limit to number of students who can apply for the Archbold Memorial Hospital Auxiliary Scholarship, and the student may attend any institution of his/her choice. Please make the students aware of these requirements and encourage each student that applies to do his/her best in each area.

The deadline for submitting all applications is **02-17-2027**
No applications will be accepted after the deadline.

Applications can be completed by hand or submitted online along with the supporting documents by following this link: https://www.archbold.org/about/auxiliary-volunteers/archbold-auxiliary-scholarships/. Completed handwritten or typed applications can be left at the Information Desk at the hospital or mailed to the address below.

Leigh Ross
208 Fairways Drive
Thomasville, GA 31792

Thank you for your assistance in making this information available to interested students.
If you have questions, please contact me.

Sincerely,

Leigh Ross
Scholarship Chair
229-224-8592 | leighwross@gmail.com

COVER SHEET TO APPLICATION FOR SCHOLARSHIP

This is a scholarship application only. Determination of scholarship recipients is made solely by the Scholarship Committee. The decisions are determined by the applicant meeting all of the criteria, and all decisions are final.

PLEASE READ VERY CAREFULLY

- Please print or type your application.
- Answer every question on the application. Use N/A if a question does not apply to you. Blank spaces will disqualify applications.
- DO NOT ATTACH A RESUME
- Application must be legible, complete, and must be signed (cursive signature) by applicant.
- A signed official acceptance letter from college/school, on official school letterhead, must be included.
- Official transcript of grades from the school(s) you are attending must be included.
- Three letters of reference, which must be signed by the individuals giving information. You may use only one current/former teacher as a reference. The other two must come from outside of your school.
- Please attach a one-page typed, double spaced narrative. The narrative should explain your reason(s) for selecting a medical related career and other information that would indicate attitude and interest in your chosen career and why you are applying for our scholarship.
- It is MANDATORY that all areas and all requested forms be completed and attached when received by the Auxiliary.
- Please do not reproduce as a double-sided form — single sided only.

ALL APPLICATIONS MUST BE RECEIVED BY 02-17-27

Archbold Auxiliary

Application for Scholarship

Personal Information

Please Print or Type

Full Name:

Last:_____ First:_____ Middle:_____

Male ( ) Female ( ) Phone Number (where you can be contacted) _____

Present Mailing Address _____

City: _____ State: _____ Zip: _____

Permanent Home Address *(if different)* _____

City: _____ State: _____ Zip: _____

Parents Names:

Father: _____

Mother: _____

Educational Information:

Where are you currently attending school? _____

Have you taken a college entrance exam? Yes ( ) No ( )

If so, which one and what was your score? _____

What are your professional goals? _____

_____

_____

_____

_____

What is your chosen course of study? _____

_____

What is your cumulative grade point average? *(weighted)* _____

What college/school do you plan to attend? _____

When do you plan to enter school? _____

Please list honors, academic or otherwise, that you have received:

_____

_____

_____

_____

_____

Occupational Information:

What health or science related fields or activities have you been involved in?

_____

_____

_____

_____

Please list all other volunteer work or activities that you have been involved in:

_____

_____

_____

_____

_____

List all jobs you have held (date, employer, type of work) and indicate whether full or part-time.

Employer	Dates	Duties

Give the names and addresses of *three* adult references, not relatives, who know you and who can give information about you. For example, they may include a teacher or counselor, minister, or employer. You may use only one current teacher/counselor as a reference; the other two must come from outside of your school.

Name	Complete Address	Phone Number	Job/Position

Certification:

I declare that the information reported is true, correct, and complete.

_____ _____

Signature Date

Checklist:

- Answer every question on the application. Use N/A if a question does not apply to you.
- Do *not* attach a resume
- Applications must be legible, complete, and signed (cursive signature) by applicant.
- A signed acceptance letter from college/school, on official school letterhead must be included.
- Official transcript of grades from school(s) you are attending.
- Three letters of reference which must be signed by individuals giving information.
- One page typed, double-spaced narrative of reason(s) for selecting medical related career.

DO NOT REPRODUCE THIS APPLICATION AS DOUBLE-SIDED - USE SINGLE SIDED ONLY

Application Submission:

Completed applications can be left at the Information Desk in the Main Lobby at Archbold Memorial or mailed to the address below. Please take note of the submission due dates. For more information, please visit www.archbold.org/auxiliary-scholarships.

Leigh Ross
Auxiliary Scholarship Chair
208 Fairways Drive
Thomasville, GA 31792