

# Toole County Medical Auxiliary Scholarship Application

Eligibility: Graduate of Shelby High School or North Toole County High School (with a minimum 3.0 GPA), or a Toole County Resident with an intention to pursue a degree in the medical or health care field at an accredited University, College, or Technical College.

Name \_\_\_\_\_

Address \_\_\_\_\_

Birthdate \_\_\_\_\_

Phone # \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Number of Children in Family \_\_\_\_\_ Number Attending College \_\_\_\_\_

Name of High School Attended \_\_\_\_\_ Date of Graduation \_\_\_\_\_

Name of College/University Attending \_\_\_\_\_

Course of Study \_\_\_\_\_

Health Care Employee in Toole County?

Employee:  Yes

No

Years worked in Health Care in Toole County \_\_\_\_\_

Where \_\_\_\_\_

Toole County Resident:  Yes  No

Plan to attend as:  Part-time student  Full-time student (12+ credit hours)

Please return your application to:  
Toole County Medical Auxiliary  
Attn: Scholarship Committee  
100 11<sup>th</sup> Ave. S  
Shelby, MT 59474

Application must be received by 5 pm on April 15