John McGrath Memorial Scholarship Application

The John McGrath Memorial Scholarship was established to honor the memory and contributions of the late John McGrath, a long-time Arthurite and prominent community supporter who died in March 2022. John was a loyal fan of the Arthur community and specifically, a proud supporter of the Arthur EMT Association and Arthur Fire Department. His wife, Jody, also served our community as an EMT-Intermediate on the Ambulance Service for many years. John would attend all fundraisers the Arthur EMT Association put on and donated generously. He always supported the EMTs, striking up a conversation, and paying for meals when he saw them, no matter who they were with. John was very thankful for the services that the Arthur EMT Association provided to both the community and personally.

Eligibility Criteria

The Arthur EMT Association is pleased to fund and offer one \$500.00 scholarship to a deserving high school senior graduating from either Arthur Lovington Atwood Hammond (ALAH) High School or Arthur Christian School (ACS) in 2023. The awardee must provide proof of acceptance and confirmed enrollment in a two- or four-year college or university with the intent of pursuing a degree in healthcare.

Application Requirements

Please return completed application to your school counselor by April 17, 2023 for referral to our Scholarship Committee. ALL required attachments, including a completed essay and letter of recommendation, must be submitted together.

Please return the following items:

- 1. Completed and signed attached application form.
- 2. Maximum 500-word essay answering all the following:
 - a. What personal experiences have influenced you to choose a career in healthcare?
 - b. How do you plan to pursue your career in healthcare?
 - c. What impact do you hope to leave through a career in healthcare?
- 3. Official high school transcript showing a GPA of at least 2.5.
- 4. Letter of acceptance from college or university that identifies anticipated course of study.
- 5. One letter of recommendation from someone other than a teacher or relative.

Due Date: April 17, 2023

INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED

John McGrath Memorial Scholarship Application Form

Personal Information		
First Name:	Last Name:	Middle Initial:
Date of Birth:		
Home address:		
City:State:	Zip:	
Phone Number:	Email Address:	
Academic Information		
Cumulative GPA:		
High School(s) Attended:		Dates:
Anticipated Major/Degree Progra	m:	
Have you received or applied for identify:	financial assistance to pursue y	our course of study? If yes, please
Source	Amoun	nt:

Activities and Interests

A. Please list and describe community service and volunteer activities you have been involved with:

Organization	Activity	Dates Completed
		•
. 0 1 1 1 1 /		
efly describe your role/how y	you participated in above activities:	
	your involvement in high school ext	racurricular activities such as
athletics, organization m	nembership or leadership positions:	
		racurricular activities such as Dates Involved
athletics, organization m	nembership or leadership positions:	
athletics, organization m	nembership or leadership positions:	
athletics, organization m	nembership or leadership positions:	
athletics, organization m	nembership or leadership positions:	
athletics, organization m	nembership or leadership positions:	
athletics, organization m	nembership or leadership positions:	
athletics, organization m	nembership or leadership positions:	
athletics, organization m	Role	
Organization Organization	Role	

Award or Honor	Awarding Organization	Date
D. Please list and describe a	ny work experience:	
Employer	Role/Position	Dates of Employmen
		•
ly describe your responsibil	ities in above position(s):	
	1 ()	
reby certify that the st wledge.	atements herein are true and c	orrect to the best of my

Signature of Applicant