



The Atrium Health Stanly Volunteers and the Atrium Health Cheer Shop
will be offering scholarships to
Stanly County high school graduating seniors that currently reside in Stanly County.
The scholarships monies paid directly to the college.

The following requirements pertain to the scholarships:

1. Scholarships awarded to those who are pursuing a degree in a health-related field.
2. Scholarships are based on financial need.
3. Each applicant must submit a typed statement, two paragraphs in length, explaining why he/she has chosen a career in healthcare.
4. Each applicant must submit three letters of recommendation, two from high school faculty members and one from someone other than a family member or school-related person.
5. Each applicant must submit their high school transcript, plus a list of extra-curricular activities.
6. Applicants will submit a head and shoulders picture for use in press releases, newsletters

Applications, letters of recommendation, school transcripts and written statements
all sealed in large envelope.

Mailed to 301 Yadkin Street Albemarle NC 28001

or

Delivered to the office of the
Volunteer Services or Cheer Shop

Scholarship Committee for Volunteer Services will review all applications

If there are questions, please contact Kim Davis at 980-323-4387



Name of Applicant: _____

Address: _____

City and Zip Code: _____

Date of Birth: _____

Telephone: _____

Name of High School: _____

Guidance Counselor: _____

List of Extracurricular Activities:

List of Work Experience, including Volunteering:

Anticipated Field of Study:



List of Colleges/Universities to which you have applied for admission:

_____ Accepted? Yes, ___ No ___

_____ Accepted? Yes, ___ No ___

_____ Accepted? Yes, ___ No ___

Which College/University do you plan to attend?

Mailing Address of Financial Aid Office at the College or University you plan to attend. Please note this is different from the general address.

Do you expect to live on or off campus?

Please list other scholarships you have received



Mother's Name

Address if different from above

Employer/Occupation

Last year income _____ Estimated Income this year _____

Father's Name

Address if different from above

Employer/Occupation

Last year income _____ Estimated Income this year _____

Minors live at home (including yourself)?

Minors enrolled in institutions of higher learning for the next school year including yourself.

Other Comments or Considerations?

