

UNAC/UHCP

Community Scholarship Program



Putting Patients First Since 1972

PLEASE POSTMARK BY DECEMBER 31
OFFICIAL APPLICATION FORM



Last year, UNAC/UHCP inaugurated an ambitious and comprehensive scholarship program to assist our members seeking to continue their education in the health care field, our family members pursuing post-high school educational endeavors, and our community members striving to realize their dream of becoming a health care professional. This year, thanks to an increased dedication of UNAC/UHCP resources along with contributions from NUHHCE and AFSCME, we have expanded the number of scholarships available and the scholarship amounts.

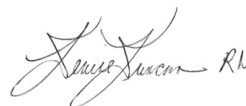
The Scholarship Program is structured to expand on existing scholarship opportunities available to our members and families. As part of our affiliation with the AFL-CIO, our current and retired members and their spouses and dependent children are eligible for 130 scholarships ranging from \$500-\$4,000 to attend a trade school, college, or university for undergraduate or graduate studies. As part of our affiliation with AFSCME, our members' children when they are high-school seniors are eligible to apply for 10 scholarships of \$2,000 each year up to four years to attend a four-year college or university to pursue an undergraduate degree. Our staff and elected leaders, again due to our affiliation with AFSCME, are provided an opportunity to develop as a labor leader by applying for one of three annual scholarships to attend a six-week trade union program at Harvard University in Cambridge, Massachusetts.

As our vibrant, strong union continues to grow and expand, we will become an even more powerful force for promoting quality patient care and creating model work environments. A critical component of this expansion is providing scholarship opportunities for our members, our families, and our communities.

In Solidarity,



Ken Deitz, RN, BSN
UNAC/UHCP President



Denise Duncan, RN
UNAC/UHCP Executive Vice President



Jettie Deden-Castillo, NP
UNAC/UHCP Treasurer



Charmaine Morales, RN
UNAC/UHCP Secretary



This is a competitive scholarship, and applicants are evaluated according to academic ability, social awareness, and appreciation of the labor movement. A GPA of 3.0 or higher is recommended. These one-time awards are for study beginning in the Fall Term. Students may re-apply each year.

The UNAC/UHCP Community Scholarship Program is an ongoing program of scholarships available to students seeking health care professional degrees at an accredited institution located in Southern California. Five scholarships of \$1,000 each are awarded annually to the winners selected from applicants who meet the eligibility requirements and submit complete applications.

To be eligible for a scholarship the student must:

- Have graduated from high school or be a graduating high school senior who is seeking to become a health care professional;
- Be enrolled or enrolling for the upcoming Fall Term in a health care professional degree program at an accredited college, university, trade or technical school located in Southern California (defined as Kern County and all counties south of it); and
- Be available to attend an awards banquet on Saturday, May 3, 2014 at 7:00 p.m. in San Dimas, if selected as a scholarship recipient.

The scholarship may be used for study in a health care field only.

SELECTION

The UNAC/UHCP Scholarship Committee, consisting of impartial health care professionals who are members of UNAC/UHCP, will thoroughly examine all application materials submitted by each scholarship applicant. The application materials include the application form, essay(s), transcript (if applicable), recommendation letter, and contributions to or appreciation of the labor movement.

Based on the record of each applicant, the Scholarship Committee will then choose five (5) scholarship recipients and announce the winners by **MARCH 15**. Every applicant will be notified by a letter sent to the address provided on the application form of the outcome of the selection process. UNAC/UHCP will not provide any information on the status of an application before March 15.

The Scholarship Committee's decision is final and cannot be appealed.

INSTRUCTIONS

4

For UNAC/UHCP Community Scholarship Program:

1. Complete the application form on pages 5-6 (enclosed).
2. Compose an essay, typed and double-spaced, not to exceed 250 words, on the subject: "Why I want to become a health care professional."
3. Compose an essay, typed and double-spaced, not to exceed 250 words, on the subject: "What the labor movement has meant to me and my family."
4. As a 3.0 GPA is recommended, please attach an official copy of your transcript from your most recent degree program, undergraduate transcript, or high-school transcript.
5. Include a letter of recommendation from a teacher or health care professional, not to exceed one page, explaining why he/she believes you should receive the scholarship.
6. Please make sure your complete application and all supporting documentation (essay, transcript, letter of recommendation, proof of union membership) are mailed together in one envelope, **POSTMARKED NO LATER THAN DECEMBER 31**, to:

UNAC/UHCP Community Scholarship Program
Attn: Scholarship Committee
955 Overland Court, Suite #150
San Dimas, CA 91773-1718

7. Please do not send photos.

APPLICATION

5

(Please print in ink or type.)

Applicant's Name _____

Address _____

City _____ State _____ Zip Code _____

Phone (____) _____ E-mail address _____

List any current employment (location/job position). _____

List any activities you participate in at your school. _____

List any offices held or honors received in these activities or employment. _____

List any academic honors that you have received. _____

List any community service or social justice activities or awards you have received. _____

List all accredited college, university, trade or technical schools you have been accepted to, attend, or applied to for acceptance for the upcoming Fall Term. _____

All essays written as part of the UNAC/UHCP Scholarship application process become the property of UNAC/UHCP. UNAC/UHCP retains the right to reprint some or all of the winning essays in UNAC/UHCP's *The Voice Newsletter*, on UNAC/UHCP's website, or in other union publications and to identify the authors of the winning essays. UNAC/UHCP also reserves the right to reprint, describe or excerpt these essays in other publications or to assign that right to others.

Applicant Signature _____ Date _____

For applicants under 18 years of age:

I am a parent or guardian of the Applicant, and hereby give my consent to UNAC/UHCP using the Applicant's name, photograph, or essay (in whole or in part) in press releases and on the UNAC/UHCP website if the Applicant is selected as a UNAC/UHCP scholarship winner or alternate.

Parent/Guardian Signature _____ Date _____

Print Name _____

APPLICATION (continued)

6

(Please print in ink or type.)

High School Information

Name of High School from which you graduated or will graduate: _____

Location of High School (City, State): _____

Attendance dates at High School (from Month/Year to Month/Year): _____

Date (Month/Year) you received or will receive a degree/diploma from High School: _____

High School Grade Point Average (Average/Scale): [Enter showing Average/Scale, e.g. 3.9/4.0 or 4.1/5.0] _____

High School Class Rank/Class Size (skip if not applicable): [Enter showing Rank/Size, e.g. 1/400 or 100/250] _____

How did you (or a family member) hear about the UNAC/UHCP Scholarship Program?: (website, email, letter, union member, union leader, school financial aid department, other) _____

Post-High School Education Information

Have you or will you have attended College for at least one year by the end of the upcoming Spring?: _____

Name of College you have or will have attended at least one year as of this upcoming Spring. If more than one, list the one you have most recently attended: _____

Location of College (City, State): _____

Attendance dates at College (from Month/Year to Month/Year): _____

Major/Field of Study at College: _____

Date (Month/Year) you received your degree/diploma at this College (skip if not applicable): _____

College Grade Point Average—Average/Scale (skip if not applicable): _____

If you have attended more than one College, add additional explanation with College names, location, dates of attendance, degrees (sought or earned), and Grade Point Average here: _____

Applicant Signature _____ Date _____