



Floyd Ellis Scholarship

The Floyd Ellis Scholarship Fund is established with the College Heights Foundation through a gift made by Med Center Health.

The purpose of the Scholarship Fund is to pay tribute to Floyd Ellis and to recognize the contributions he made to the communities of Southcentral Kentucky. Mr. Ellis' dedication to his profession gained the respect and admiration of his colleagues and all with whom he came in contact.

This scholarship is for the Fall 2024–Spring 2025 academic year and may be awarded to one student or divided between two students. It includes the cost equivalent to in-state tuition and an allowance for books, which will be awarded annually.

To recognize the effective leadership Mr. Ellis provided in the position of President of Warren Rural Electric Cooperative Corporation (WRECC) and his dedicated service as Chairman of the Board of Directors of Med Center Health, recipients of the Floyd Ellis Scholarship must meet the following criteria:

- Dependent child of an employee of WRECC.
- Full-time student at Western Kentucky University. A study program in a healthcare-related field is not required, but is preferred.
- The scholarship is available for incoming freshmen, sophomores, juniors and seniors.
- If no undergraduate candidate is qualified, the scholarship may be given to a qualified graduate student.
- Recipients must have a cumulative GPA of at least 3.0 in each semester that the award is received.

The award is not renewable; however, recipients may re-apply and will be considered for the award in subsequent years.

Please mail completed application to:

Med Center Health
ATTN: Amy Hardin
800 Park Street
Bowling Green, KY 42101

Application and accompanying documents due by Friday, March 15, 2024.

Please email to Amy Hardin, Executive Director, at hardac@mchealth.net, or call 270.745.1535 with any questions.

**** Applicants will not be considered if all requested information is not included.**

Floyd Ellis Scholarship Application

Section A: Personal Information

Name: _____ Age: _____

Home Address: _____

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____

Name of parent employed by WRECC: _____

Section B: High School

High School Name and Location: _____

High School Graduation (month/year): _____

Section C: College

Will you be a full-time student at WKU? Fall Semester 2024 Yes ____ No ____

Spring Semester 2025 Yes ____ No ____

Academic Major: _____

Anticipated Graduation Date: _____

Have you or will you apply for financial aid? Yes ____ No ____

Are you a recipient of any other scholarships/grants? Yes ____ No ____
(Include KEES funding or estimated amount.)

If you answered yes, please complete:

Name of Scholarships/Grants and Amounts Awarded (*do not summarize - but list each amount individually*): _____

Section D: Activities - Please indicate years of membership and leadership positions.

Membership in school activities (High School and/or College):

Membership in non-school activities (community, church, civic, employment, etc.):

Honors and Awards:

Section E: Supporting Documentation – Please attach the following documents.

- One-page essay explaining your financial need and why you should be awarded the scholarship.
- Official copy of your high school or college transcripts, including your cumulative grade point average.
- Please make sure ACT scores are included on the transcript.
- Three letters of reference (i.e. Principal, Counselor, Teacher, or Employer).
Please be sure to have your references include their phone number on the letter.

***Applications submitted without the required documentation will not be considered.**

Student Signature _____ Date _____