

Gary Alan Woodward Nursing Scholarship Fund

Med Center Health Foundation, through the generosity of Jacque Woodward and her family, has created a scholarship in memory of Gary Alan Woodward, her husband, to help future nurses. Gary Alan Woodward was an RN who served his community with dedication and honor, and who died of COVID-19. This scholarship will continue his legacy.

This scholarship is available starting Fall semester 2021. It is a \$2,000 scholarship to be applied to tuition, required textbooks and fees.

To qualify for the nursing scholarship, applicants must meet the following criteria:

- Currently employed by Med Center Health (MCH). (Preference is an employee of The Medical Center at Scottsville, but not limited to this facility.)
- Completed 3 years of service with commendable or above performance review ratings
- Personal interview
- Be previously accepted into a WKU nursing program (with an established completion date)
- Maintain minimum 2.75 GPA requirement
- Agree to work for MCH upon graduation for the term of one year
- Passionate about learning how to provide excellent patient care
- Enthusiastic about continuous learning and teaching others
- Demonstrates ability to work in team environment

To be considered for the nursing scholarship you must submit:

- Completed Application
- College Transcript (current)
- Two Professional Reference Letters

(All requested information must be submitted with application)

Submit Application to:

Med Center Health Foundation Attn: Beverly Neves 800 Park Street Bowling Green, KY 42101 (270) 745-1543

Application Deadline: Tuesday, June 1, 2021.

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Please complete the following information:

Name:	
Address:	
City, State, Zip:	
Telephone No:(Day)	(Evening)
Email Address:	
Social Security No: Graduation Date:	
How long have you been employed at Med Center Health?	
Job Title:	
Date of Hire:	
Supervisor:	
Department:	
Have you been accepted into a nursing program at Western Kentucky Univer	sity?
Type of Nursing Degree being pursued:	
Write a brief explanation of why you should be awarded this scholarship.	

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Terms of Agreement

Signature:	Date:	
I have read the above terms of agreement and will abide by the terms if I am selected to receive the scholarship.		
The recipient of the Gary Alan Woodward Nursing Scholarship agree offered, at Med Center Health for a minimum of one year upon grad signed confirming that you understand and accept the conditions of	duation. This statement must be	
The recipient of the Gary Alan Woodward Nursing Scholarchin agree	s to account amployment if	