



NORTH VALLEY HEALTH EDUCATION FOUNDATION
1380 East Avenue, Suite 124, PMB 377
Chico, CA 95926
(530) 591-4161
www.NVHEF.org

A nonprofit organization dedicated to improving health through education.

December 1, 2020

Dear Paramedic Applicant for Class Starting August 2021:

Thank you for interest in and applying for our Butte College Marcus Whitacre - Endowed Scholarship. Here is our timeline for your information and records.

The NVHEF proudly gives scholarships to students who have an intention of returning to Northern California. We give preference to any student who has graduated from a High School in the following counties:

Butte, Colusa, Del Norte, Glenn, Humboldt, Lassen, Modoc, Plumas Shasta, Siskiyou, Sutter, Tehama, Trinity, Yolo, Yuba.

Applications Available – December 2020, via our website NVHEF.ORG

**All Applications and Supporting Documents, including reference letters,
MUST BE RECEIVED BY MAIL OR VIA ONLINE APPLICATION
By September 1, 2021.
Postmarks and hand-delivered applications are not acceptable.**

Applicant interviews will be scheduled for a week in September 2021, yet to be determined.

If you have any questions on the application, please contact us via email to Sara@NVHEF.org.

Should you be selected to receive the \$1,000.00 scholarship, you will be required to show proof of good standing in program in the month of October 2021. The scholarship will be funded to you after this proof is sent received.

ELIGIBILITY REQUIREMENTS

1. Must be currently in good standing in all college course work and accepted into the Mobile Intensive Care Paramedic program.
2. Funds must be used during the 2021-2022 school year.
3. Must show evidence of financial need.



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PARAMEDIC SCHOLARSHIP APPLICATION 2021-2022

PERSONAL INFORMATION (Type or Print):

Name: _____ Date: _____

Mailing Address: _____

Email Address: _____

Best phone number: _____

1.0 ACADEMIC INFORMATION:

1.2 Colleges Attended: _____

1.3 High School Attended: _____

2.0 SUMMARY OF ESTIMATED EXPENSES AND INCOME FOR 2021-2022 ACADEMIC YEAR:

2021-2022 Estimated Full-Time Cost of Attendance for 9-Mo. Academic Year	
Please Use Your Institutions Cost of Attendance	Annual
Tuition/Fees (Direct costs paid to College/University)	
Book/Supplies	
Room/Board	
Transportation	
Miscellaneous/Personal	
Child Care	
Other: Please Specify	
TOTAL	

Please Describe Other: _____



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Estimated Assets/Income:

Cash on Hand: \$ _____

Anticipated Scholarship Amounts: \$ _____

Anticipated Grants/Waivers for use on Fees/Tuition: \$ _____

Other Individual Assets (Trust Funds, Savings, 401K, Stock Accounts, etc.): \$ _____

Expected W-2/Work Income: \$ _____

Are There Additional Incomes, living with you, that contribute to your living and school expenses?

NO YES ... If Yes, How Much is Expected: \$ _____

Financial Support from parents: \$ _____

Are they (parents) providing Room/Board? YES NO

All Other Income – Please describe _____ \$ _____

Amount of Any REPAYABLE LOANS to DATE: \$ _____

5.0 IN ADDITION TO THE REFERENCE LETTERS.... THESE THREE (3) DOCUMENTS MUST BE SUBMITTED WITH YOUR APPLICATION: Please limit all responses to TWO (2) pages total.

5.1 A Statement of Your Education and Career Goals

- a. Describe your educational goals in the program/degree for which you seek this scholarship.
- b. Be specific in describing how this education's program/degree will benefit both you and your community and, if applicable, your current employer.
- c. What are your long-range educational and career goals?
- d. After completing your education, where, geographically, would you like to start/continue your employment?

5.2 A Statement of Financial Need

- a. Describe the financial circumstances which show your need for this scholarship.
- b. What other efforts are you making to secure financial help to finance this education's program/degree?

5.3 Unofficial Transcripts from Colleges and Universities Attended

- a. If none attended, please so state and this requirement will be waived.



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ADDITIONAL REQUIREMENTS TO BE SUBMITTED: UPLOAD or MAIL IN by Deadline

1. Two (2) letters of recommendation.
 - One of the letters **MUST** be a letter of recommendation from a faculty member that has taught the student in the last 2 years.
 - One of the letters may be from a supervisor at work, faculty member or another professional.
2. Verification Letter showing Proof of Enrollment/Good Standing in the Program for which the scholarship will be used.
3. Letter describing your ties to the local community.

AMOUNT OF SCHOLARSHIP

The North Valley Health Education Foundation is committed to supporting medical orientated students who are from the north state and could potentially return to the area to practice medicine. One (1) scholarship in the amount of \$1,000.00 will be given to a student in the 2021-2022 Paramedic Program.

Applicants should submit all required application materials, including attachments and verifications, directly to the North Valley Health Education Foundation address below. Please use the full address listed.

CERTIFICATION BY STUDENT:

I declare that all the information contained in this application and the supplemental application, including all attached documents and statements, is true and correct to the best of my knowledge. The North Valley Health Education Foundation has my permission to verify the information herein and to request an office copy of my most recent federal income tax return, if necessary. If approved for a scholarship, I agree to meet all the terms and conditions of the grant agreement:

1. Remain in the program for which the scholarship is granted;
2. Submit receipts for the registration fees paid;
3. Submit grade reports received for each quarter/semester funds are received.

The North Valley Health Education Foundation has my permission to access any and all information on my academic standing (including GPA), licensure pass rate, and job placement. (This information will be used for tracking purposed only.)

Applicant's Signature: _____

Date: _____

All applicants should submit via mail or online application, all required application materials, including attachments and verifications, directly to: North Valley Health Education Foundation, 1380 East Ave., Ste 124, PMB #377, Chico, CA 95926. All applications must be received no later than **SEPTEMBER 1, 2021.** **Postmarks are NOT accepted! This is a firm deadline. No exceptions.**