

# Mad River Valley Health Center Scholarship Application

Email to: [skibettyvt@yahoo.com](mailto:skibettyvt@yahoo.com)

Name:

Address:

College you plan to attend?

What do you plan to study?

What extracurricular activities did you participate in?

Did you perform any volunteer work?

Submit an official HS transcript with your application.

Essay: Why are you planning to pursue a degree in a health care discipline.  
How will this scholarship help you to achieve your goal.

