

### 2025 Caregiver Knowledge Fund Scholarship Packet

Providence Montana Health Foundation's Knowledge Fund was established to assist caregivers of Providence St. Patrick Hospital, Providence Medical Group and Providence St. Joseph Medical Center, who desire to change careers, further their education or complete a degree while working at Providence.

Each year, scholarships will be awarded to caregivers based on merit. Caregivers must have been employed a minimum of one year at time of application and maintain their employment with Providence Health & Services - Montana Service Area during their schooling and after its completion for at least six months. Scholarship funds will be paid directly to the institution indicated on the scholarship application once evidence of acceptance has been provided to the Foundation. Scholarship funds are to be used for tuition, fees, books, and supplies.

#### **Application Process**

Applicants must complete the Knowledge Fund Scholarship Application form and submit two <u>current</u> letters of recommendation, including one from a current manager/supervisor. A short essay, of 300 words or less, is also required which outlines the applicant's goals for their education and future career plans. <u>The letters of recommendation</u>, essay and signed application form must be received by Morgan Giddings in the Learning Center no later than **Monday**, **May 19, 2024**.

The Application packet can be submitted via:

- Inter-office mail routing
- Email morgan.giddings@providence.org
- Fax to 329-5688 or
- Mail to:

Providence St. Patrick Hospital The Learning Center Attn: Morgan Giddings 500 W. Broadway Missoula, MT 59802

\*\*Please Note: University of Providence Scholarship recipients are not eligible to apply for Knowledge Fund Scholarships

#### **Selection Process:**

Applications will be reviewed by the *Knowledge Fund* Scholarship committee. <u>Recipients will be notified after the Scholarship committee makes their selections, and awards will be announced the week of June 9th.</u>

If you have any questions regarding the scholarship application process or need help completing the form, please contact Morgan Giddings in the Learning Center: 406-327-5928.

<sup>\*</sup>Incomplete applications and/or applications received after May 19th will not be accepted.



The following scholarships are currently available to all caregivers in the Providence Western Montana Region. Please fill out your application thoroughly. You may indicate application for more than one scholarship, if desired. Read instructions carefully to insure you have completed all requirements.

#### **Caregiver Scholarships Eligibility Criteria:**

#### • VIM & VIGR Knowledge Fund Scholarship: \$3,000 (1) \$2,500 (10):

Caregivers pursuing a degree in any field from an accredited institution that will help further their careers with Providence Health & Services.

#### • Dr. William "Bill" Bekemeyer Endowed Scholarship: \$1,500 (1):

Caregivers pursuing education or an advanced degree or certificate in health care, with preference given to nursing, respiratory therapy, and pharmacy.

#### Joyce Dombrouski Endowed Scholarship: \$1,000 (1):

Nurses pursuing education or an advanced degree or certificate to help further their career as a nurse with Providence Health & Services.

#### • <u>Caregiver General Scholarship: \$1,000 (3) - \$500 (1):</u>

Caregivers pursuing a degree in any field from an accredited institution that will help further their careers with Providence Health & Services.

#### • Health Professionals/Eileen Toulouse Scholarships: - \$1,000 (1):

Caregivers pursuing a <u>healthcare</u> degree from an accredited institution that will help further their careers with Providence Health & Services. Preference will be given to caregivers who work in Environmental Services or Food & Nutrition.

#### • Lynette Walker Memorial Scholarship: \$500 (1):

Caregivers currently working as or wishing to pursue a career as a Surgical Technician. A Scholarship may also be made available to a student currently pursuing a Surgical Technician career.

#### Nursing Education Scholarships: - \$500 (2):

Providence employed CNA or a caregiver's child that is a current CNA and is wishing to or pursuing a nursing degree. If there is not a suitable candidate for the primary purpose of the scholarship(s), it may be awarded to a qualified caregiver or child of a caregiver of pursuing a healthcare degree.

#### • Sister Alberic Marie Scholarship: \$1,000 (1):

Caregivers currently working in the Radiology Department or wishing to pursue a career in Radiology.

#### • Winter Scholarship: \$1,000 (2):

Caregivers currently working in the Food & Nutrition Department or wishing to pursue a career in Nutrition will be given priority. If there are no applicants wishing to pursue a career in Nutrition, all other healthcare applications will be considered.

The Knowledge Fund would not be possible without the generosity of our many important donors.



## **2025 Caregiver Application**

# **Personal Information** Today's Date Name Phone \_\_\_\_\_ Address Zip Email **Caregiver Information (minimum of one year employment required)** Hire Date \_\_\_\_\_ Dept. \_\_\_\_ Current Position Please list any other positions you have held at Providence St. Patrick Hospital, Providence St. Joseph Medical Center or in a healthcare related field, beginning with the most recent (please add additional positions on a separate sheet): **Position Employer Dates**



# Scholarship(s) Applying For:

□ VIM & VIGR Knowledge Fund Scholarship	
□ Dr. William "Bill" Bekemeyer Endowed Scholarship	□ Joyce Dombrouski Endowed Scholarship
□ Caregiver General Scholarships	☐ Health Professions/Eileen Toulouse Scholarship
□ Lynette Walker Memorial Scholarship	□ Nursing Education Scholarship
□ Sister Alberic Marie Scholarship	□ Winter Scholarship



# **Educational Plans**

College, University, or another Program ye	ou have been accepted to attend:		
Name of program/degree			
Date program begins	Attending:   Full-time	□ Part-time	
Anticipated date of graduation	Number of credits per semester _		
Anticipated cost of tuition and book fees per semester: \$			
Please list other assistance or scholarships	that you will receive for your education	on program. Please describe	
the source, amount, and duration:			
□ No other assistance			
Attachments (required to qualify)			
1) Two <u>current</u> letters of recommenda			
2) Essay outlining educational and car	reer goals (300 words or less)		
Name:	 Date:		