

**CASTLEVIEW HOSPITAL VOLUNTEER AUXILIARY  
APPLICATION FOR USU EASTERN NURSING SCHOLARSHIPS**

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**CASTLEVIEW HOSPITAL GIFT SHOP  
300 NORTH HOSPITAL DRIVE  
PRICE, UT 84501  
(435) 637-4800**

Castleview Hospital Volunteer Auxiliary is committed to policies of equal opportunity and nondiscrimination on the basis of race, national origin, sex, age or status as a handicapped individual in all of its programs and activities, including but not limited to this program. Castleview Hospital is an equal opportunity employer. Evidence of practices that are not consistent with this policy should be reported to the Personnel Director at (435) 637-4800.

To qualify for this scholarship:

- Applicant must be accepted into the USU Eastern Nursing Program, *Price Campus*, for the current year.
- Applicant must show current GPA
- Applicant must provide 2 letters of recommendation
- Applicant must provide 3 references
- Applicant will be interviewed by the Volunteer Scholarship Selection Committee
- Preference will be given to residents of Carbon and Emery Counties

**INSTRUCTIONS: COMPLETE AND RETURN THIS APPLICATION TO THE ABOVE ADDRESS**

**DEADLINE: June 1, 2023**

**Please Print**

DATE \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ CITY STATE ZIP

DATE OF BIRTH \_\_\_\_\_  
MONTH DAY YEAR

HIGH SCHOOL ATTENDED \_\_\_\_\_

GRADUATION YEAR \_\_\_\_\_

ARE YOU PRESENTLY RECEIVING FINANCIAL ASSISTANCE?

\_\_\_\_\_  
\_\_\_\_\_

DO YOU ANTICIPATE FINANCIAL ASSISTANCE WITHIN THE COMING SCHOOL YEAR?

\_\_\_\_\_

LIST EXTRA-CURRICULAR ACTIVITIES, SPECIAL AWARDS OR RECOGNITION RECEIVED (Boys/Girls State, Eagle Scout, FFA, 4-H, debate, athletics, hobbies, clubs, private or studio instructions, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIAL SKILLS YOU POSSESS (include any special skills from military services):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROFESSIONAL LICENSES AND CERTIFICATIONS:

Type	State	Issued	Date	Number
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

HAVE YOU EVER BEEN EMPLOYED BY THIS HOSPITAL? YES \_\_\_\_\_ NO \_\_\_\_\_