



Chesapeake Hospital Authority Scholarship Application

For students who are pursuing a career in the Healthcare industry – Applications must be received no later than **Friday, April 25, 2025.**

Full Name: _____ Phone Number: _____

Address: _____ Zip Code: _____ No. in Household: _____

GPA: _____ SAT: _____ Class Rank: _____ High School: _____

Have you volunteered in the healthcare field? Yes ___ No ___ If so, where? How many years have you served?

College where you have been accepted: _____

Major you will be pursuing: _____

Scholarships you have applied to: _____

Scholarships you have already received: _____

List names and telephone numbers of two people as character references:

Signature: _____ Date: _____

1. Submit the completed application packet online or email daviana.wright@chesapeakeregional.com.
2. Packet assembly is of **high importance** due to the large number of applicants. Please **scan** all documents together. Please place documents in the following order:
 - Completed Chesapeake Hospital Authority Scholarship application
 - Resume (including a summary of high school activities, achievements, community service, and work experience)
 - Copy of unofficial high school transcript
 - A one-page typed response to the question: *Why do you feel you are the most qualified to receive the Chesapeake Hospital Authority Scholarship?*
 - Full FAFSA report (*all pages are required*)
 - Copy of your college acceptance letter for the upcoming semester, including your student ID number.

If the packet received is not complete it will be eliminated from consideration. Late applications will not be accepted. Applicants will be notified by email whether they have been awarded the scholarship or not.