



*2018 Volunteer Resources Scholarship  
Application*

Name: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Area of Healthcare Study: \_\_\_\_\_

Name of School Attending: \_\_\_\_\_

School Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_  
(if under 18)

Mail application & essay to **FHN Human Resources** 1045 W. Stephenson St. Freeport, IL 61032. Submissions must be postmarked by **September 7, 2018**. Finalists will be notified and scheduled for interviews in October-November.