

Oregon Society for Respiratory Care Scholarship Program

The Oregon Society for Respiratory Care Scholarship Program provides financial assistance for first and second year students enrolled in an accredited Respiratory Care Program in Oregon. The OSRC will award 4, \$500.00 scholarships to, First year and Second year students. If applicants are enrolled in a four-year program, the scholarships will be offered for the second and third years of school.

Specific Requirements

Applicants must:

1. Be a high school graduate or equivalent; and
2. Be enrolled or accepted for enrollment in the Respiratory Care Program
3. Documentation must be received verifying admission into the program.
4. Must have a minimum GPA of 3.0
5. Must demonstrate characteristics of good citizenship, reliability, desire and positive attitude.
6. Must be a member of the American Association of Respiratory Care (AARC), or in the process of joining.

Application Process: Each applicant must complete the following

1. Scholarship application form (found on OSRCNW.org)
2. One-page personal essay which should include (1 page):
 - What is your interest in the RC program
 - What are your personal and professional goals and how will the goals you set apply to the Respiratory profession.
 - Why you feel qualified for this scholarship
3. Two letters of Recommendation
4. Unofficial transcript

Applications submission process:

1. All application documents must be submitted to the Education Chairperson by **November 1st** each year. Application review and selection will take place at the November OSRC board meeting. Scholarship recipients will be announced at the annual OSRC conference in February. Scholarships will be paid out at the conference.

Scholarship Selection Process

All applications will be mailed to the Education Chairperson. She/He will ensure scholarship applications are complete. Missing material will disqualify an applicant from consideration. The completed applications will be presented at the November OSRC Board Meeting for review and selection of recipients and alternates.

Each application packet must include:

- Completed Scholarship Application Form
- One-page personal essay which should include:
 - a. What is your interest in the RC program
 - b. What are your personal and professional goals
 - c. Why you feel qualified for this scholarship
- Two Letters of Recommendation
- Unofficial Transcript

OSRC Board / Committee Members:

- Will review and evaluate the application packets. Each member will use the standard evaluation form.
- If a student writes more than one page in his or her personal essay, only the first page of the essay is to be considered.
- Select 2 scholarship recipients and one alternate for each year (1st and 2nd students, or 2nd and 3rd for a four year program)
- Fill out the selection form
- The President will contact by mail the recipients and non-recipients

Scholarship award:

- The Treasurer will issue payment to each recipient at the OSRC conference or via the mail.
- Recipients will be announced at the OSRC Annual Conference and in the Spring issue of Breathsounds.

Oregon Society for Respiratory Care Scholarship Application

Date submitted:

Application Information

Legal name	
Mailing Address	
City & Zip Code	
Phone Number	
E-Mail	
AARC member#	
College Name	

Academic Achievements

Do you have a High School diploma or GED? If yes, year received	High School: Y N GED: Y N Year:
What is your High School cumulative GPA?	
What is your current cumulative college GPA?	
What year of the program are you currently registered in?	

Employment, Extracurricular Activities and

Talents: In the space provided, list your employment, extracurricular activities such as school and community service, leadership, clubs, academic achievements, awards, and honors you would like the selection committee to consider.

Employment, activity or talent	Awards, honors or positions held	Dates of participation

I certify that, to the best of my knowledge, the information provided on the application is complete and accurate. I have read and understand the scholarship guidelines and the criteria for eligibility to receive the scholarship. I authorize the OSRC to furnish copies of this application, essay and other attachments to any of the scholarship committee members. I hereby give approval for the OSRC to publicize any scholarship award I receive, listing my name, hometown, name and amount of the scholarship and biographical summary.

Signature: _____ Date: _____

Attach the following: completed application, one page essay, and two letters of recommendation, unofficial Transcript.

Mail to: Janet M. Holloway, Respiratory Care, 1255 Hilyard St, Sacred Heart Medical Center, Eugene Ore, 97440