

Northern New England Chapter of Healthcare Financial Management Association (NNE HFMA) Member Family Scholarship Program Application

INSTRUCTIONS:

1. The applicant must be an immediate family member of a member of the NNE HFMA chapter, currently have at least a cumulative 3.0 grade point average in high school (or college if currently enrolled), have been accepted by (or currently attending) an accredited college or university and intend to major (or currently majoring) in a financial management related field.
2. A final transcript from the high school the applicant graduated from must be submitted with this application.
3. A current transcript from college if currently enrolled must be submitted with this application.
4. A recommendation from a high school faculty member must be submitted with this application.
5. Email this application, the official transcript(s) and the letter of recommendation to (see email address below).
6. The completed application and the supporting documents must be received by **July 1, 2022**.
7. If you are approved, a member of the committee will contact you to validate that you have been accepted and plan to attend an accredited college or university.

1. Name _____ Email Address: _____
Street Address _____
City, State and Zip Code _____ Telephone Number: _____
2. Relationship to HFMA Member: HFMA Member Name _____
HFMA Member's Member Number _____
Your relationship to the HFMA _____
Member (e.g., son, daughter, etc.) _____
HFMA Members Current and Past involvement in Chapter _____
3. High school you graduated from: _____
4. Cumulative Grade Point Average: _____ Class Standing: _____
5. High school graduation date: _____
6. Name of college or university you are currently enrolled in: _____
7. Which financial management related field are you planning on majoring in? If possible please provide a catalog description of the major if it is not readily apparent: _____
8. a) Please list the colleges and/or universities to which you have applied: _____
b) List the colleges and/or universities you have been accepted to attend: _____
9. List your extracurricular activities, honors and awards, as well as other organizations in which you hold membership: _____

10. List any work experience while attending high school (employer and position held): _____

11. Indicate (by short essay) what your career goal is and why you should be the recipient of an award from NNEs HFMA.

I declare that all information reported on this application is true and correct to the best of my knowledge.

Date _____
Return to: NNE HFMA Chapter Scholarship Committee
Attn: Jeffrey Walla
Berry, Dunn, McNeil & Parker
jwalla@berrydunn.com

Applicant's Signature _____
Member's Signature _____