**RN Scholarship Program for FCC Nursing Students**

The purpose of this program is to assist current employees and future hires in obtaining the education/training needed to satisfy the critical Registered Nurse positions available at Frederick Health.

Frederick Health offers a limited number of scholarships annually as determined by the annual budget. The program is intended to be beneficial to both the employee/candidate and the Hospital. The hospital agrees to fund a portion of the employee/candidate’s education in return for a pre-determined length of employment with Frederick Health after graduation. The hospital will pay as outlined below for tuition, required books, lab fees, and school required uniforms as appropriate for a period of up to four (4) semesters. The maximum monetary value of the scholarship is $15,000.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **College** | **1st Semester**  **Nursing Program** | **2nd Semester**  **Nursing Program** | **3rd Semester**  **Nursing Program** | **4th Semester**  **Nursing Program** | **Upon Graduation** | **Total Financial Assistance** |
| Employed | $2,500 | $2,500 | $2,500 | $2,500 | $5,000 | **$15,000** |
|  |  |  |  |  |  |  |
| Not employed |  |  |  | $2,500 | $5,000 | **$7,500** |

\****Employment must be a minimum of 12 hours per week to receive this scholarship program.***

The intent of the scholarship is to select qualified candidates from Frederick, Washington, and Carroll counties in Maryland along with neighboring West Virginia and Pennsylvania counties. Frederick Health reserves the right to entertain candidates from other locations who commit to working at Frederick Health Hospital after graduation.

The college attended for this scholarship is Frederick Community College.

Each candidate is expected to obtain employment with Frederick Health before college or early in schooling to maximize financial assistance and gain relevant work experience. Time worked prior to graduation does not count toward the post-graduation work requirement. Each scholarship awardee must agree to work two full years at a 0.9 FTE (36 hours per week) upon graduation.

If Frederick Health has a position to offer the candidate upon graduation, the candidate must apply and be considered with all other applicants. If the candidate is chosen and hired as a Registered Nurse I, he or she will receive wages equivalent to those received by other Registered Nurse I employed by Frederick Health. The position offered could be any shift.

If a position is offered to the candidate and is not accepted, the contract is considered breached. If the scholarship recipient completes a portion of the contracted service time but not to its entirety, the entire amount of the scholarship loan will be paid back to the Hospital plus up to 10% interest per year charged on the annual date the repayment letter is issued by the Hospital.

If the scholarship recipient meets all his/her obligations, the agreed obligations will be considered met up the completion of the pre-determined length of service. At the time the agreement is met, the employee is free to obtain a job wherever he/she may choose with no liability or debt to Frederick Health.

**Selection Criteria**

The candidate must provide the most recent grade point average (high school for a new graduate or college for a current/previous undergraduate student). The candidate must have a minimum 3.0 grade point average (GPA).

1. A well written 1–2-page essay describing why candidate should be chosen for the scholarship must be included with the application. Essay must include:

* The candidate’s career goals.
* Why the candidate thinks that he or she would be a good nurse.

1. The candidate will supply a minimum of two (2) signed letters of reference from non-family members. Letter of reference may not be older than two (2) years.
2. The candidate must provide a recommendation from one of the schools pre-nursing course professors.
3. The candidate will complete all required interviews as determined by Frederick Health. Nursing and Human Resources will be involved in the interview process.
4. The candidate must sign the scholarship application page

**Scholarship Recipient Responsibilities During Scholarship**

1. The recipient must maintain a 3.0 GPA in classes in the major curriculum and a 3.0 GPA overall.
2. It is the responsibility of the recipient to furnish grade reports to Frederick Health via the Human Resources Department at the end of each grading period and prior to the start of the next term. Grade report must include completed semester GPA and cumulative GPA.
3. Before each semester begins, the recipient must submit to Human Resources a class schedule showing all classes the student will take in the upcoming term.
4. It is the responsibility of the recipient to notify Human Resources in writing of any changes of status during the term of the scholarship. This includes but is not limited to: adding/dropping a course, withdrawing, or not enrolling, name change, etc.
5. It is the responsibility of the recipient to notify Human Resources of any change in major. The agreement is entered into by the Hospital for the express purpose of obtaining viable candidates for Registered Nurse positions. The Hospital reserves the right to terminate this agreement in the event the recipient changes his or her major and/or learning institution without the prior written approval of Frederick Health.
6. It is the responsibility of the scholarship recipient to complete all aspects of the RN program, including but not limited to graduation, and passage of all applicable licensing exam within six (6) months of graduation.
7. The recipient understands that it is not the responsibility of Frederick Health to obtain the above-named documents. The responsibility to furnish these documents to the Human Resources Department belongs solely to the recipient.

**Scholarship Recipients Obligation upon Graduation**

1. The recipient must commit to working for Frederick Health as a Registered Nurse full time for a period of no less than 24 months. The recipient must apply for positions no later than 10 days after all requirements have been met (including course work, internships, and licensing) making the recipient eligible for work as a Graduate Nurse or Registered Nurse. This work may be in any nursing department and shift that is available.
2. The recipient understands that is not the obligation of Frederick Health to employ the recipient for any length of time. The employment (and continued employment) of the recipient is contingent upon a position opening at the time of graduation and satisfactory performance while on the job. However, if any position is open for a Registered Nurse the recipient must apply for that position and considered with other applicants, or terms of this agreement will be considered breached. In addition, if the position is offered to the recipient, the recipient has the obligation to accept the position. If the position is offered and not accepted, the terms of this agreement will be considered breached.

**Frederick Health Responsibilities**

1. Frederick Health agrees to review all applications objectively and without prejudice.
2. Upon satisfactory proof of enrollment to an approved school, the Hospital agree to pay up to

Amounts listed in page 1 per year for the bills to include tuition, books, and lab fees. An acceptance letter is required before the first tuition bill is paid, and a class schedule and grade report are required before the tuition bill is paid each semester thereafter.

1. Frederick Health agrees to consider the agreement obligations met if none of the obligations of the recipient are breached.
2. Frederick Health recognizes that the agreement is null and void if the terms are breached in any way.

**In the Event of a Breach of Contract**

If the recipient fails to fulfill any of the agreed upon obligations and/or responsibilities, the contract is considered null and void. At that time, Frederick Health is relieved of all prior commitments to the recipient. The recipient is required to pay back all money paid by Frederick Health for the education of the recipient, plus up to 10% per annum accounting from the date the Hospital notifies the recipient of the amount the Hospital will be reimbursed. The recipient will begin a monthly payment plan to Frederick Health for the costs incurred by the Hospital. The monthly payment will be determined by the total funds expended on behalf of the recipient to date from Frederick Health.

At the time of a breach of contract, the funds are considered a loan and will be treated as such. Frederick Health will report this as a debt to the credit bureau. A late or missed payment will be reported to the credit bureau.

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

**Printed Name of Scholarship Applicant**

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

**Signature of Scholarship Applicant Date**

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

**Signature of parent of legal guardian (if applicant is under 18 years of age)**

**Registered Nurse Scholarship Program**

**Contract Signature Page**

I accept all terms in the Frederick Health Scholarship application. As an applicant of the Frederick Health Registered Nurse Scholarship, I agree to abide by all guidelines set forth including, but not limited to: In the event of a Breach of Contract section and the four (4) year timetable (from awarding to graduation) as set forth in the overview.

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

**Printed Name of Scholarship Applicant**

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

**Signature of Scholarship Applicant Date**

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

**Signature of parent of legal guardian if under 18 years of age**

**Registered Nurse Scholarship Program**

**Application Form**

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

Last First Middle Initial

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

Street City State Zip

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

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

Degree/Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College or university: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated graduation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education to Date:

|  |  |  |  |
| --- | --- | --- | --- |
| **School Name** | **Course of Study** | **Did you Graduate** | **Receive a degree?** |
| High School: |  | Yes No |  |
| College: |  | Yes No | Yes No |
| Have you ever been employed by Frederick Health? | Yes  Dates: \_\_\_\_\_to \_\_\_\_\_ | No | Currently Employed  Yes \_\_\_\_ No \_\_\_\_\_ |

**Registered Nurse Scholarship Program**

**Application Checklist**

The following items must accompany the application form:

\_\_\_\_\_ Certified copy of high school and/or college transcript (if applicable)

\_\_\_\_\_ Resume

\_\_\_\_\_ Two (2) letters of recommendation from non-family members

\_\_\_\_\_ Recommendation from the school of nursing Director

\_\_\_\_\_ Completed Breach of Contract

\_\_\_\_\_ Completed Contract Signature Page

\_\_\_\_\_ Completed Application Form

Upon receipt of a complete application packet, the candidate may be selected for an interview with the Scholarship Selection Committee. The committee will review all completed packets and discuss interview results, then make a recommendation for scholarship monies.

Completed packets must be submitted to:

Frederick Health

Human Resources

516 Trail Avenue

Frederick, MD 21701

Alternatively, completed packets can be emailed to Courtney Cline at [CHCline@Frederick.health](mailto:CHCline@Frederick.health).

For questions: contact Human Resources at 240-566-4550