



MOSAIC LIFE CARE HOSPICE SCHOLARSHIP

Submission Deadline: April 15th at Noon



PURPOSE

The Mosaic Life Care Hospice Scholarship has been established to provide financial assistance for those pursuing educational opportunities by developing their knowledge and skills toward **a career that will improve the care persons receive as they near the end of life.**

ESTABLISHING THE SCHOLARSHIP

Created in 2012 to honor the 25th Anniversary of Mosaic Life Care Hospice, this scholarship award was established with the intent to advance the Hospice profession and make a difference in providing quality end-of-life care.

SCHOLARSHIP FORMAT

One annual award of \$500 will be granted. Heartland Foundation will manage the scholarship process. Serving as a catalyst and convener, Heartland Foundation is a public charity dedicated to championing education and empowering people to build healthy and thriving communities.

SELECTION

The Heartland Foundation Scholarship Council includes representatives from Heartland Foundation's Board of Trustees, health care professionals, and Mosaic Life Care Hospice. The council considers scholarship applications, approves selection of the recipient, reviews the guidelines on an annual basis and makes changes as deemed appropriate.

CRITERIA

- Applicants **must be accepted and enrolled in 12 hours of study** for a regular semester or equivalent to full-time status in an accredited program.
- Applicants **must reside within the following MISSOURI counties:** *Andrew, Atchison, Buchanan, Caldwell, Carroll, Clay, Clinton, Daviess, DeKalb, Gentry, Grundy, Harrison, Holt, Livingston, Mercer, Nodaway, Platte, Ray and Worth.*
- Applicants **must demonstrate financial need.**
- Applicants must maintain a **3.0 or above grade point average** on a 4.0 scale.
- The Scholarship Stewardship Council may elect to invite some applicants to interview in person.
- While it is not a stipulation for receiving an award, it is the hope of Mosaic Life Care Hospice

and Heartland Foundation that recipients of this scholarship will consider pursuing a career within this service region.

APPLICATION PROCESS

Complete the cover page. In narrative form, respond to all required TOPICS listed on the cover page clearly and completely. NOTE: ADDRESS ALL POINTS; GENERIC NARRATIVES ARE NOT ADVISABLE. Gather additional documentation (transcript, proof of acceptance/full-time enrollment, and letters of recommendation) and assemble the packet **in this mandated order:**

- **Cover page**
- **Narrative** (refer to cover page for details).
- **Official certified transcript** from educational institution most recently attended (or photocopy of high school grades) with *class rank/GPA highlighted*. If received in a sealed envelope, applicant may open to make the required copies. (An unofficial transcript printed from online posting is not considered official and application will be subject to disqualification).
- **Proof of current acceptance and full-time enrollment** in an accredited/approved program (such as class schedule with credit hours and program acceptance letter from institution).
- **At least three (3) letters of recommendation**, (on letterhead where applicable) with person's name, position and relationship to applicant. Letters must be dated within the last 90 days and must be signed.

Return original application and attachments, plus two (2) copies on or before April 15th at noon. All information and attachments must be complete and *collated for application to be considered. (*COLLATED = THE SET OF ORIGINAL DOCUMENTS - COVER PAGE AND ATTACHMENTS PLUS TWO (2) COPIED SETS OF APPLICATION PACKET. All sets must have documents arranged in the correct order.)

Mailing/Delivery Address:

Heartland Foundation
518 S. Sixth St.
St. Joseph, MO 64501

***If delivering the packet, use the north HF entrance.**

Questions may be directed to:
Dr. Sandra Pettit Weber
816.271.7571 or 800.447.1083

Email: sandra.pettitweber@heartlandfoundation.org



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APPLICATION COVER PAGE

APPLICANT NAME LAST FIRST MIDDLE
HOME ADDRESS

CITY STATE ZIP COUNTY

EMAIL ADDRESS TELEPHONE

PERSONAL REFERENCES

Name Position PHONE

Name Position PHONE

NARRATIVE INFORMATION - Please provide the below information in narrative form. ADDRESS ALL POINTS IN THE NARRATIVE! GENERIC NARRATIVES ARE NOT ADVISABLE. Do NOT provide any personally identifiable information in your narrative (name, address, past schools attended, etc.).

- Within a 300 - 500 word narrative, please explain why you are applying for the Mosaic Life Care Hospice Scholarship and how you will contribute to improving care that persons receive at the end of life in your intended profession.
• In addition to the 300 - 500 word narrative mentioned above, please provide the following information in narrative form:
o Degree and career field you plan to pursue
o Institution to which you are accepted (proof of acceptance and enrollment is required)
o Expected date of graduation
o Explanation of need for financial assistance, anticipated costs, and extenuating circumstances
o List other financial funds (financial aid, scholarships, grants, etc.) received with dollar amount. Please indicate if you have applied to and been accepted into the Stepping Stones program at Mosaic Life Care
o Information related to your work (if applicable) length of service, hours worked weekly, how many hours you plan to work during school, etc.
o Volunteer information (if applicable) where, when, approximate number of hours served in the last twelve months, and name of supervisor(s)
o Awards or honors received (if applicable)

Applicant's Signature Date

Return original application and attachments and two (2) copies on or before April 15th at noon; All information and attachments must be complete and collated for your application to be considered. *Note: Address all the above topics in narrative form and do not include personally identifiable information!

Mailing/delivery address: Heartland Foundation, Attn. Dr. Pettit, Weber, 518 S. Sixth St., St. Joseph MO 64501
Phone: 816.271.7571 or 800.447.1083; email: sandra.pettitweber@heartlandfoundation.org
*Note: if hand delivering the packet, please use the north entrance.



MOSAIC LIFE CARE HOSPICE SCHOLARSHIP CHECKLIST

Submission Deadline April 15th at Noon

APPLICATION CHECK LIST

(Carefully check this list to ensure you have not missed any requirement and that your application packet is assembled in the mandated order.)

Are you qualified to apply for this scholarship?

- Have you been accepted and are you enrolled in 12 hours of study for a regular semester or equivalent to full-time status in an accredited program?
- Do you reside in one of the listed counties?
- Are you pursuing a career that will improve the care persons receive as they near the end of life?
- Have you maintained a 3.0 or above grade point average on a 4.0 scale?

Have you written the 300 – 500 word narrative? Remember to NOT include any personally identifiable information such as name, address, past schools attended, etc.

- Explain **why you are applying for the Mosaic Life Care Hospice Scholarship** and **how you will contribute to improving care that persons receive at the end of life** in your intended profession

Did you respond to the following items in narrative form? Again, remember to NOT include any personally identifiable information such as name, address, past schools attended, etc.

- Information on the degree and career field you plan to pursue
- A description of your career goals
- The name of institution to which you are accepted
- The date of acceptance
- The expected graduation date
- An explanation of need for financial assistance
- Anticipated costs, and/or extenuating circumstances
- A list of other financial funds (financial aid, scholarships, grants, etc.) received with dollar amount
- General work history and how many hours a week you work both currently and how many you plan to work during the school year
- List of awards or honors received
- Volunteer information – where, when, approximate hours served in the past year, and name of supervisor(s)
- List of extracurricular activities

Have you assembled everything that is needed for your packet?

- Return three (3) sets of the complete application and attachments (an original and two copies)
- Each set should be arranged in the following mandated order:**
 - Scholarship application cover page
 - Narrative
 - Additional information in narrative form
 - Official certified transcript:
 - Verifying cumulative grade point average
 - Showing class rank/GPA; highlight the GPA
 - Providing scale used (i.e. 4 point scale)
 - Proof of acceptance and full-time enrollment
 - Three (3) letters of recommendation that include:
 - Recently dated – within the last 90 days
 - On letterhead where applicable
 - Person's signature
 - Person's position
 - Person's relationship to you
- Mail or deliver the application packet on or before the due date of April 15th at noon