

# Oregon Society for Respiratory Care Scholarship Program

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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 a minimum of four, \$500.00 scholarships to First-year and Second-year students of an Associate Degree program or, if applicants are enrolled in a Bachelor Degree program, the scholarships will be offered for the third and fourth 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
2. One (1) page personal essay which should include:
  - 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?
    - a. Why you feel qualified for this scholarship?
3. Two letters of Recommendation
4. Unofficial transcript

### Applications Submission Process:

All application documents must be submitted to the Education Chairperson by **January 15th**. Application review and selection will take place during February by the scholarship application review committee. Scholarship recipients will be announced at the annual OSRC conference in March. Scholarships will be awarded at the conference.

## Scholarship Selection Process:

Please follow directions carefully. To be considered completed applications and required documents (application packet) must be mailed or sent electronically to the Education Chairperson and must be **received by** the submission deadline. The chairperson will review scholarship applications for meeting minimum requirements. **Missing material or failure to follow directions will disqualify an applicant from consideration.** The completed applications will be presented to the Scholarship Review Committee for review and selection of recipients and alternates

## Each applicant 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 / Scholarship Selection Committee Members:

Consists of OSRC Board Members not directly affiliated with any respiratory care education program

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

# Oregon Society for Respiratory Care Scholarship Application

### Applicant Information

Date Submitted	
Legal Name	
Mailing Address	
City ST ZIP Code	
Phone Number	
Email Address	
AARC Member #	
College Name	

### Employment, Extracurricular Activities and Talents

In the space provided, list and briefly describe 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

Type of Activity:	Description of Activity:	Dates of Participation:

#### Extracurricular Activities or Talents

Type of Activity:	Description of Activity:	Dates of Participation:

#### Awards, Honors or Positions Held:

Type of Activity:	Description of Activity:	Dates of Participation:

## Academic Achievements

Do you have a High School Diploma or GED? Indicate year received.	High School: <input type="checkbox"/>	Year:
	GED: <input type="checkbox"/>	Year:
What was your High School cumulative GPA?		
What is your current cumulative college GPA?		
What respiratory care program year are you currently enrolled in?	<input type="radio"/> First-year	<input type="radio"/> Third-year
	<input type="radio"/> Second -year	<input type="radio"/> Fourth-year

## Certification and Authorization

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 grant 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:	
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## Application Process

Attach the following to this completed 2-page application: one-page essay, two letters of recommendation, and unofficial transcript(s).

Submit completed application packet via mail, email or fax by **January 15th, 2019**.

### Mail

Mail complete application packet to:  
**OSRC Education Committee Chair**  
**Leeann Forsythe, BHSc, RRT**  
**Respiratory Care Program Director**  
**Concorde Career College**  
**1425 NE Irving St Suite 300**  
**Portland, OR 97148**

### Email

Submit complete application packet electronically via email attachment to:

**Leeann Forsythe, BHSc, RRT**

[lforsythe@concorde.edu](mailto:lforsythe@concorde.edu)

**Indicate "OSRC Scholarship Application" in subject line.**

### Fax

Submit complete application packet via fax to:

**Attention: Leeann Forsythe, RRT**

**Fax to 503-296-2164**