

# Tabor Foundation Health Care Scholarship 2018

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## *Berkshire Taconic Individual Grants & Scholarships*

### **First Name\***

*Character Limit: 100*

### **FIMS Profile Number**

*Character Limit: 10*

## *Application Details*

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### **Application Guidelines\***

I have read and agree with the application guidelines. [Click here to view the guidelines.](#)

### **Choices**

Yes

### **Residency\***

Please indicate the town you have resided in for the last two years prior to this application.

*Character Limit: 5000*

### **Age\***

What age are you?

*Character Limit: 5000*

### **Education\***

Please list all degrees and/or certifications and the institutions and dates where these were obtained.

*Character Limit: 5000*

### **Employment**

Who is your current employer and what is your current position? (If applicable)

*Character Limit: 2000*

### **Educational Plans\***

Please state the name of the school you are accepted at and plan to attend or are currently attending, whether or not you will be a full time student and your expected date of graduation. If you will be a part-time student, please explain why.

*Character Limit: 10000*

### Intended Major\*

Please describe the course of studies you are interested in pursuing and what degree or certificate you will receive. If you intend to have a minor, please let us know what that is.

*Character Limit: 10000*

### Educational Timeline\*

How long is the educational program you are undertaking (years or semesters)? How many years or semesters have you already completed? When did you begin your studies? If you took time off since you began your studies, please let us know why.

*Character Limit: 5000*

### Tuition, Fees, Room & Board Costs\*

What are your tuition costs for the next school year? If you are boarding, please list the room and board rate as well. Please also list any related fees. Please be sure to use exact costs and do not estimate.

*Character Limit: 10000*

### Books Costs

What are your book costs for the next school year?

*Character Limit: 10000*

### Transportation Costs

What are your transportation costs (if commuting) for the next school year?

*Character Limit: 5000*

### Job Continuance or Work/Study Programs

Will you be able to continue in your current job while continuing your education? If so, how many hours per week will you work? Will you be working at the school to help cover tuition or rooming costs?

*Character Limit: 5000*

### Parent/Care Giver\*

Please indicate if you are a Parent or Care Giver and, if so, the relationship, number and ages of your dependents.

*Character Limit: 5000*

### Single Parent\*

Are you a self-supporting single parent?

### Choices

Yes

No

## Childcare

What are your childcare costs for the next school year?

*Character Limit: 5000*

## Other Costs

What other costs do you have to attend school next year (please list and itemize)?

*Character Limit: 5000*

## Total Costs\*

What are the total amount of funds needed? Please list how these funds would be used. For example: (\$1,000 tuition; \$200 books).

*Character Limit: 5000*

## Siblings

If you are a dependent of your parents, how many siblings does your family have who will be enrolled in college in the next school year (2018-2019)?

*Character Limit: 10000*

## Financial Aid\*

What other financial aid have you applied for? Please let us know if any of these requests have been granted and, if so, for exactly how much? Please be sure to indicate the amounts for loans, scholarships and work-study.

*Character Limit: 5000*

## Prior Experience

Please describe any prior experience you have in the health care field as a volunteer or on a paid basis. Please list job titles, places worked and dates of service. If possible, please provide reference contact information for your work (name, email address, telephone number).

*Character Limit: 10000*

## Future Plans\*

Where do you plan to work when you complete your studies?

*Character Limit: 10000*

## Scholarship Fund\*

How did you hear about the Tabor Foundation Scholarship Fund?

*Character Limit: 5000*

## Essay\*

Please complete a statement to tell the committee your career goals and how you plan to work in Northwest Connecticut or Northeastern Dutchess County after you complete your studies.

*Character Limit: 5000*

## Transcript and GPA

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To attach a document to your application, click the **Browse** button. Then, navigate to the file on your computer. Select the file, and click the **Open** button. Then, click the **Save As Draft** button on the bottom of your application to complete the upload. To return to the application, click the **Continue** button.

If any of the requested documents are only available in hard copy, please use the **Fax to File** link in the top left corner to convert them into electronic format.

To use a supplied form, click the corresponding link on the application. The file will open in your browser. Save the file to your computer by going to **File > Save As**, and click **Save**. Then, navigate to the appropriate area on your computer where the file was saved, and reopen the file. Once you have completed the form, attach it to the application by following the directions above.

### Transcript\*

Please attach a copy of your most recent transcript.

*File Size Limit: 2 MB*

### GPA

If you are a recent high school graduate, please include your grade point average.

*Character Limit: 5000*

## Letters of Recommendation

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In the space below, you will be asked to provide the email address and contact information for two references. One may be personal, but one must be professional. For applying high school graduates, the professional reference may be from a former teacher or a reference from a summer job.

Letters must be received by June 30th for the application to be considered complete.

### Name of Person Writing Your Letter of Recommendation\*

What is the name of the person writing your letter?

*Character Limit: 100*

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What is the name of the person writing your letter of recommendation?

*Character Limit: 100*

**Email Address of First Person Writing A Letter on Your Behalf\***

*Character Limit: 254*

**👤 Letter of Recommendation**

In the space below please write a letter on behalf of the applicant who has requested you do so. Please include your relationship and how long you have known the applicant. If you wish, you may upload a letter using the File Upload function, please be sure it is either in a PDF or Word Document format. Thank you very much!

*Character Limit: 2000 | File Size Limit: 2 MB*

**Email Address of First Person Writing A Letter on Your Behalf\***

*Character Limit: 254*

**👤 Letter of Recommendation**

In the space below please write a letter on behalf of the applicant who has requested you do so. Please include your relationship and how long you have known the applicant. If you wish, you may upload a letter using the File Upload function, please be sure it is either in a PDF or Word Document format. Thank you very much!

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