

**McLean Auxiliary**

75 Great Pond Road  
Simsbury, CT 06070  
860-658-3710



**Merit Scholarship Application**

**Part I. Applicant Information**

Name \_\_\_\_\_

Address \_\_\_\_\_

Cell phone \_\_\_\_\_ Email \_\_\_\_\_

If you are an employee, what is your position and date of employment?

Position \_\_\_\_\_ Date of employment \_\_\_\_\_

If you are a family member of an employee.....

What is their name \_\_\_\_\_

Where do they work \_\_\_\_\_

**Part II. Education**

Current or last school attended \_\_\_\_\_

School address \_\_\_\_\_

Healthcare related degree or certificate pursuing (BSN, RN, PA)

\_\_\_\_\_

Name of healthcare school and school address

Name of school \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_ currently attending    \_\_\_ accepted    \_\_\_ applied, waiting for acceptance

### Part III. Awards and Activities

Please identify your.....

Academic awards/achievements \_\_\_\_\_

\_\_\_\_\_

Licenses or certifications \_\_\_\_\_

\_\_\_\_\_

Community service or volunteer activities \_\_\_\_\_

\_\_\_\_\_

### Part IV. Essay

“Why is furthering your education important to you?” Feel free to elaborate beyond this page.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

- Include two letters of reference from people (not family members) familiar with your character and abilities
- Include your current school’s transcript
- Return this application, references, and transcript to Karyn Lushinks, Vice President of Human Resources, via email at [karyn.lushinks@mcleancares.org](mailto:karyn.lushinks@mcleancares.org) or leave it at the front desk in an envelope with Karyn’s name on it