



1500 Koenigstein Avenue  
Norfolk, Nebraska 68701  
Phone (402) 644-7296

**FAITH REGIONAL HEALTH SERVICES  
EDUCATIONAL LOAN PROGRAM APPLICATION**

Submit application packet to Human Resources. Fall semester deadline is May 15; Spring semester deadline is October 15; Summer semester deadline is February 15. Application packet consists of the following items:

1. Completed application form
2. Essay
3. Three letters of reference

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

High School \_\_\_\_\_

Graduation Date or Expected Graduation Date \_\_\_\_\_

College \_\_\_\_\_

Graduation Date or Expected Graduation Date \_\_\_\_\_

Current or Intended Healthcare Major \_\_\_\_\_

**Academic Information: Please check your cumulative GPA**

- |                   |    |        |
|-------------------|----|--------|
| _____ 2.75 – 2.99 | B- | 80-82  |
| _____ 3.00 – 3.24 | B  | 83-86  |
| _____ 3.25 – 3.49 | B+ | 87-89  |
| _____ 3.50 – 3.74 | A- | 90-92  |
| _____ 3.75 – 3.89 | A  | 93-96  |
| _____ 3.90 – 4.00 | A+ | 97-100 |

**Work History: (Dates, Employer, Kind of Work, Hours Per Week)**

Date	Employer	Kind of Work	Hours Per Week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Activities: Leadership, Extracurricular you participated in**

<b>Date</b>	<b>Activity</b>	<b>Hours Per Week</b>
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**Honors and Awards:**

<b>Date</b>	<b>Explanation of Honor or Award</b>
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**Essay: Please indicate in essay form why you have chosen this healthcare profession and why you would like to be considered for this educational loan program.**

**LETTER OF REFERENCE**

**Name of Applicant** \_\_\_\_\_

**Name of Recommender** \_\_\_\_\_

**Each applicant for the Faith Regional Health Services Educational Loan Program is required to submit two to three letters of reference as part of his or her application. Your candid assessment of the applicant's leadership skills, desire to earn a college degree in healthcare field or previously earned college degree will greatly assist the administering committee.**

**I recommend this student for consideration as Faith Regional Health Services Educational Loan Program recipient because:**