

*KINGMAN REGIONAL MEDICAL CENTER*

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*3269 Stockton Hill Road, Kingman, AZ 86409*

**KRMC Volunteer Services**  
**Sandra Cofer Tuition Scholarship Application Spring 2024**

KRMC Volunteer Services seeks to award tuition scholarships to students pursuing a career in a medical field. Ideal candidates are performing well academically (minimum GPA of 3.0) and demonstrate excellent character.

We are offering scholarships for students who intend to enroll in college for the Spring 2024. Full-time students may qualify for up to \$1,000 and part-time students may qualify for up to \$750.

Scholarship applications must be turned in by 5:00 pm on October 31st, 2023. Submit your application by email to Cecelia Clouser at [CClouser@azkrmc.com](mailto:CClouser@azkrmc.com). Physical applications can also be turned in at the KRMC Gift Boutique.

A Volunteer Services committee will evaluate submissions based on the following criteria:

- Completion of the application
- Copy of most recent high school or college transcripts
- Attendance at an accredited college or university
- Volunteer service or employment at KRMC
- Financial need
- Responses to short essay questions
- Spelling and grammar

Applications must be filled out completely for consideration. Only applications with the 2/21 revision date will be accepted.



Describe your hobbies, extracurricular activities, or volunteer work. (100-200 words):

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List any recognitions or awards you have received. (50-100 words): \_\_\_\_\_

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What area of the medical field are you interested in? Why? (100-200 words): \_\_\_\_\_

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Why are you applying for this scholarship? (100-200 words): \_\_\_\_\_

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How many years of education will you require? \_\_\_\_\_

Will you be a full-time student? Yes No

How many credit hours will you be taking?: \_\_\_\_\_

**College Contact Information** (Required):

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Attention to: \_\_\_\_\_

School ID: \_\_\_\_\_

List expenses you expect to incur this semester:

Tuition: \_\_\_\_\_ \$ \_\_\_\_\_

Books: \_\_\_\_\_ \$ \_\_\_\_\_

Room & Board: \_\_\_\_\_ \$ \_\_\_\_\_

Other Expenses: \_\_\_\_\_ \$ \_\_\_\_\_

List other financial assistance you will receive per semester:

Personal: \_\_\_\_\_ \$ \_\_\_\_\_

Scholarships: \_\_\_\_\_ \$ \_\_\_\_\_

Grants: \_\_\_\_\_ \$ \_\_\_\_\_

Student Loans: \_\_\_\_\_ \$ \_\_\_\_\_

Other Financial Resources: \_\_\_\_\_ \$ \_\_\_\_\_

Have you received a scholarship from KRMC Volunteer Services in the past? If so, when? \_\_\_\_\_

Do you plan to remain in Kingman after your education? Why? \_\_\_\_\_

I affirm that the information provided in this application is true in all respects, without any willful omissions. I understand that if this application is false in any way I will not be considered for a scholarship.

I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date