

Cancer Services

Janet M. Post Memorial Scholarship

Cancer Services is proud to announce it is offering up to three (3) \$2,000 scholarships for high school students pursuing a major in a healthcare-related field thanks to the generosity of Janet Post.

We believe that part of being a healthcare professional involves personal initiative, leadership, and commitment to serve others. As a prospective healthcare professional, we hope the applicant demonstrates these qualities.

Eligibility Criteria:

- Applicant must be a graduating senior from a high school in Erie, Huron, or Ottawa Counties, Ohio.
- Applicant must be attending a college, university, community college, or trade school in the fall of 2023.
- Applicant must be pursuing a major in a healthcare-related field.
- Applicant must have participated in extracurricular activities throughout high school.
- Applicant must have a minimum GPA of 2.5.

Applicants must provide the following:

- Proof of higher educational institution admittance. (ex. Letter of acceptance)
- Submit a completed application form.
- Submit an official high school transcript.

The application must be postmarked/e-mailed/ by **April 30, 2023.**

Any applications received after this date will not be considered

Applications may be mailed to:

Cancer Services
505 E Perkins Avenue
Sandusky, OH 44870

Or emailed to:

CecilyBrownCS@gmail.com

Work/Employment. Indicate specific jobs held and dates of employment:

Honors or awards received during high school:

Part IV (500 words or less)

On a separate sheet of paper, please describe in short narrative your anticipated course of study, current career interest, and what inspires you to pursue a degree in the healthcare field. Also include how you plan to be an active volunteer or involved in community organizations.

Part V (optional)

Any other information you would like to share with the scholarship selection committee. You may attach letters of recommendation and/or resume, but it is not required.

I hereby authorize Cancer Services to release my personal information to selection committee members for their review and determination. I authorize Cancer Services to release information and/or photos regarding my scholarship to my school, the media and in publications of Cancer Services.

Applicant's Signature _____ Date _____