Harrison County Hospital Foundation Scholarship Application 2025

(Must be a resident of Harrison	or Crawford Coi	unty, IN or Meade County,	KY.)	
Phone		Parent /Guardian		
High School		Graduation Year (Must be within last five years)		
			(Must	be within last five years)
High School Diploma Type	Honors	Core	Regular	GED
Cumulative GPA weighted		non-weighted		
SAT score Reading	Math	Writing	Composite	
ACT score Reading	Math	English	Science	Composite
College/University you plan to	attend			
Major area of study				
List any grants or scholarships	that you have	e been awarded for	the upcoming scl	nool year.
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Please attach the following:

- A letter of intent describing your personal career goals and why you decided on a hospital/medical/healthcare related career.
- A list of extracurricular activities and interests.
- High school transcript, (or college if currently enrolled), including SAT and/or ACT scores.
- A letter of recommendation from your HS guidance counselor or college/university advisor.
- A verification of acceptance to a college/university.

APPLY ONE OF THREE WAYS:

The Harrison County Community Foundation website, HCCFIndiana.org

Mail application to: HCH Foundation Scholarship Committee

1141 Hospital Drive NW Corydon, Indiana 47112

Email to: Svoelker@hchin.org

Application must be received by April 1, 2025.

Scholarship awards will be paid directly to the student upon proof of registration from the school.

Additional scholarship opportunities are available for Harrison County residents who attend IU Southeast and Ivy Tech

For application information, contact the IU Southeast and Ivy Tech Financial Aid Offices.