



Prime Medical Alert Scholarship for Emergency Medical Technicians and Paramedics

Application for: **Fall 2015**

At Prime Medical Alert, we use and interact with certified EMTs on a daily basis so we want to help the next generation reach their dreams. This scholarship is open to applicants working toward a two year or four year degree. Applicants shall be working towards a degree with the intent on becoming a practicing EMT or paramedic upon graduation.

Student Information

Student Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Email: _____

Gender: _____ Ethnicity: _____

Date of Birth: _____ Country of Residency: _____

Name of College/University Currently Attending: _____

Estimated date of AA degree completion: _____

Name of College/University you will be attending Fall of 2015: _____

***Please include a copy of the letter of acceptance.

In Spring 2015 will you be a (circle one): Freshman Sophomore Junior Senior

Will you be attending school (circle one): Part-Time Full-Time

Please list your desired major: _____

How did you hear about the Prime Medical Alert Scholarship Program:

Personal Statement

The Prime Medical Alert EMT and Paramedic Scholarship is for those who have demonstrated a commitment to the community in regards to healthcare and social assistance and intend to apply those experiences to a future career in the emergency response field. Please answer each of the following questions in 500 words or less:

- 1.) Please describe what influenced your decision to go into a career in the healthcare and/or emergency response fields?
- 2.) Tell us what you view as the most important single characteristic for a practicing EMT or paramedic, and how you will embody that characteristic in your professional work.
- 3.) Why do you feel you are a strong candidate for this award and what sets you apart from other candidates in your field?

Letters of Recommendation:

Please provide us with at least two letters of recommendation from individuals that you know well, but are not related to you. They should outline why you are a good candidate for our scholarship program and in what capacity they know you. Letters from professors, employers, volunteer supervisors, etc. are preferential.

Section Three

Terms of Release

Application Certification:

I certify the information provided in this application is accurate to the best of my knowledge. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application. In addition, I certify that I am not related to any current employees or board members of Prime Medical Alert.

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____
(if applicant is under 18)

Release of Information:

I certify that I have read and review the criteria for the Prime Medical Alert Scholarship. I also understand that if I do not submit the required information or if it arrives after the due date, my application will not be considered. I understand the submission of this application does not ensure receipt or award of any Prime Medical Alert Scholarship proceeds. Finally, I agree to adhere to all of the terms and conditions of my scholarship(s) if I am selected as a recipient.

Signature of Applicant: _____ Date: _____

Scholarship Applications Must be Postmarked by May 31, 2015.

Mail Your Completed Application to:

Prime Medical Alert Scholarship

Attn: Joy Couffer

4323 N 12th St, Ste 105B

Phoenix, AZ 85014