



The Greater Rochester Health Foundation has established scholarships in partnership with the Urban League of Rochester, N.Y., Inc. The scholarship fund will support students who plan to pursue a career in health care. Recipients must be honored as an Urban League of Rochester Black Scholar.

Purpose of Scholarships

To support graduating seniors recognized as Urban League of Rochester Black Scholars.

To be considered for a scholarship, students must meet the following criteria:

1. Be a resident of Monroe, Genesee, Livingston, Ontario, Orleans or Wayne County
2. Submit completed application
3. Two letters of recommendation
4. An essay – (500 words) reflecting why he/she is pursuing a health career and which field of health study they anticipate pursuing
5. Recipient must enroll in a four year institution by the fall of the year of award
6. An official high school transcript showing GPA and class rank
7. Must be cumulative (9th, 10th, and 11th grade) and the first semester senior grades to determine overall grade point average for recognition as an Urban League Black Scholar, which is a “B” or better
8. **Must be in Regents or above program, only grades in Math, Science, Social Studies, English and a Foreign Language will be computed to determine Grade Point Average.**
9. SAT/ACT scores must be submitted with application
10. Graduation or Professional Photo to be submitted with application

Process

- Committee members (Judges) comprised of local college reps; GRHF representative and health care professionals will review all completed applications
- Applicants meeting the requirement will be selected for an interview.
- The GRHF Scholarship amount will be determined by Urban League Management and judges.



**Urban League of Rochester, N.Y., Inc.
Greater Rochester Health Foundation
Careers in Health Care Scholarship**

DEADLINE – 2nd Friday in April

Print Name _____

First

Middle

Last

Home Address _____

House No.

Street

City/State Zip

E-mail Address _____

Home Phone No (_____) _____ Cell Phone No. _____

Will graduate _____ Regents or other diploma _____

Family Data

Name of Parents/Guardians

Mother _____ **Father** _____

Guardian if applicable (Male & Female) _____

Telephone _____ **Home (List any other contact information**

E-mail address _____ **Cell number (s)** _____

School Information

High School _____

Address _____ **City** _____ **Zip** _____

Academic Data

SAT scores - Reading _____ **Math** _____ **Writing** _____ (submit copy of scores to us)

ACT composite scores _____ **other scores** _____ **List each on separate sheet** _____

Long range career goal _____

College or University Considering	Date applied	Application status	Major (Field of Study)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name: _____

Essay required (500 words)

Include an essay reflecting why you are pursuing a health career and which field of health study you anticipate pursuing.

Attach a typed list of the following:

1. Personal achievements – include extra –curricular activities – office held; years of service
2. Community Service Office held; years of service
3. Employment Position held; years of service
4. Awards and honors received

Professional Character References – List two (2) references and their relationship to you. **DO NOT USE FAMILY MEMBERS. *Required**

*Science teacher's Name _____

*Math Teacher's Name _____

Other Reference _____

Deadline: 2nd Friday of April

**Submit to: Urban League of Rochester, N.Y., Inc.
Black Scholars/Health Related Scholarships
265 North Clinton Avenue
Rochester, NY 14605**