



Battlefords Healthcare Foundation Inc.
Healthcare Scholarship
Application Form
2025/26

Application Deadline is Wednesday, May 14th, 2025

BHC Foundation Board of Directors recognizes the level of commitment and support given to BUH and Battlefords Region Home Care (BRHC) through the support of BHC Foundation's events, donations and fundraisers by the Battlefords and surrounding communities. The Foundation also supports BUH and BRHC in its endeavors to recruit and retain qualified staff.

We are pleased to invite graduating seniors who are seeking a career in healthcare to apply for a Battlefords Healthcare Foundation Scholarship.
Two \$500 scholarships will be awarded.

To be considered a student must:

1. Be a graduate of Grade 12 (current class)
2. Intend to pursue studies in the healthcare field
3. Intend to be employed at BUH or BRHC following completion of course
4. Complete all 5 sections in the application.
5. E-mail, Mail or Deliver your scholarship package prior to deadline *see page 3 for details.

Scholarships will be awarded on the basis of applicant letter, application quality, community service, activities and letters of recommendation.

For complete details of criteria and awarded scholarships please visit:
www.bhcfoundation.ca

Section 1: Applicant Personal Information

Name: _____ Date of Birth: _____

High school: _____ Town/City: _____

Home Address: _____ Town/City: _____

Postal Code: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

Section 2: Personal Letter from Applicant

Please include a letter that outlines the following:

1. School & extra-curricular activities
2. Career and Educational goals
3. Personal Interest pertaining to healthcare
4. Community Service*

** The BHC Foundation relies heavily on volunteers and recognizes their importance. The number of community (not necessarily healthcare) volunteer hours donated by the student will also be considered.*

Section 3: Academic & Post-Secondary

- Include a copy of your Grade 12 academic transcript
- Include material that indicates you have been accepted to a post-secondary health course

Section 4: Letters of Recommendation

Please provide three letters of recommendation from teachers, counselors, volunteer leaders, or work supervisors who can describe your abilities and potential to succeed as you pursue a career in healthcare.

**One letter must be from a teacher under whom you have studied and two others from the community (must not be relatives).*

Section 5: Review & Signature

Prior to submitting your application package, please ensure all sections are completed:

Section 1: Applicant Personal Information
Section 2: Personal Letter from Applicant
Section 3: Academic & Post-Secondary material
Section 4: Letters of Recommendation
Section 5: Review & Signature

Cont. on page 3

Cont. Section 5: Review & Signature

*Signature of Parent/Guardian required if under the age of 18.

Signature of Parent/ Guardian

Signature of Applicant

Date

Date

Email, mail or deliver your Application package to the following:

BHC Foundation Scholarship Committee

Battlefords Healthcare Foundation
Box 1358
1092 107th Street, North Battleford, Sask. S9A 1Z1

Email: leanne.ducommun@bhcfoundation.ca

Application packages must be received by **Wed., May 14, 2025.**

If you have questions, please contact:

Leanne Ducommun
Executive Director
BHC Foundation

Direct Ph. 306 446-6658 ~ Office Ph. 306 446-6652
Email: leanne.ducommun@bhcfoundation.ca

