Opportunities In Emergency Care
Spring Lake Park High School • ISD #16

1100 81st Ave NE, Spring Lake Park, MN 55432
763-785-5556 • Fax: 763-786-2661
Email: bneiss@district16.org
Website: www.slpoec.org

OEC FALL CAMP SCHOLARSHIP APPLICATION

APPLICATION DEADLINE: OCTOBER 14, 2010

Requirements for scholarship application:

- □ Completed scholarship application
- □ Completed and turned in Camp registration
- □ Enrolled in EMT-1 or -2 curriculums, or enrolled in NAR curriculum
- □ No missing assignments
- □ Four absences or less prior to application deadline for the semester or trimester
- □ Two tardies or less prior to application deadline for the semester or trimester
- □ Have acquires minimum re to the following questions (must be typed 10 pt. font and must be longer than one page):

  1. What do you do for the community outside of OEC?
  2. What have you done to help the OEC program or yourself financially, such as fundraising or working at events, etc.? (Please be specific.)
  3. What OEC sponsored events have you participated in? Please list event, hours, and dates
  4. If you receive a scholarship, what will you gain from it?

Attach answers to this sheet. This page MUST be on top and stapled to your answers

Full Name: _____
Last ***First*** ***MI***

Grade level: _____ Home school _____

Office use only:

□ **All items received**	**Committee member's initials: _____/_____**
□ **Instructions followed**	**Amount awarded: $_____**
□ **Criteria checked**	**Date notified: ____/____/2010**
□ **Camp registration received**	**Director signature: _____**