

# IRENE GRONEAU MEMORIAL HEALTH CAREER SCHOLARSHIP APPLICATION

1. Name of Applicant: \_\_\_\_\_
2. Permanent Mailing Address: \_\_\_\_\_
3. Attach a copy of Tribal Enrollment: \_\_\_\_\_ District Enrolled: \_\_\_\_\_
4. Applicant's Academic Status for the Upcoming Academic Year:  
 Doctorate       Master's       Senior       Junior       Sophomore       Freshmen
5. Degree Pursued (*Specify*): \_\_\_\_\_
6. Health Career Goal: \_\_\_\_\_
7. Rank in Class (*Grade Point Average*): \_\_\_\_\_
8. Name and Address of Accredited Program of Higher Education Where Applicant is Accepted:
9. Attach to this Application the Acceptance at an Accredited Institution of Higher Learning (*i.e. letter of acceptance*):
10. Upon graduation what are your future plans? (May attached additional paper for written response if needed.)
  
11. Why have you chosen a health career? (May attach additional paper for written response if needed.)

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Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**DEADLINE FOR RECEIPT OF APPLICATIONS IS JULY 31ST**

Please return application to the Human Services Board Secretary/Lisa Red Wing,  
Sisseton-Wahpeton Oyate, Box 509, Agency Village, South Dakota 57262

# **SELECTION GUIDELINES FOR THE IRENE GRONAU MEMORIAL HEALTH CAREER SCHOLARSHIP**

1. The candidate must present a new or updated acceptance letter from an accredited institution of higher learning. Must be enrolled in a two-year, four-year, graduate or doctorate level degree program in a health-related field.
2. Scholarships shall be awarded exclusively to enrolled members of the Sisseton-Wahpeton Oyate.
3. The student shall be responsible for carrying a minimum of twelve (12) credits and maintaining a Grade Point Average of 2.0 or above. (Failure to do so will affect present scholarship award from this program.)
4. Parents' income shall not be considered for this scholarship.
5. The deadline for receipt of a **FULLY COMPLETED** application is July 31<sup>st</sup>.
6. Scholarships will be reviewed the 2<sup>nd</sup> Tuesday in August.
7. The applicants will be notified of scholarship awarded by mail with **ONE-TIME SCHOLARSHIP PAYMENT** enclosed by the 15<sup>th</sup> of September of each year.
8. For further information, please contact the Human Services Board Secretary at 605-237-3521. Applications are available with the HSB Secretary or SWO Higher Education at 605-698-8211. Please mail you application to the SWO Human Services Board C/O HSB Secretary Lisa Red Wing P.O. Box 509, Agency Village, South Dakota 57262.

**Revised June 12, 2018**