

About the Dr. Dave and Mary Ann Kapaska New Americans in Health Care Scholarship

In enduring recognition of the priceless contributions to the Avera Mission and care for those who just need a hand, the Dr. Dave and Mary Ann Kapaska New Americans in Health Care Fund was created to provide higher education scholarships to New Americans entering the dynamic field of health care.

It is the expressly stated desire of Dr. Dave and Mary Ann Kapaska that the scholarship considers books, educational supplies, and housing as includable educational expenses. It is also their desire that the definition "field of healthcare" be not limited to direct patient interactive positions, but rather any field with opportunities within Avera Health.

Eligibility Requirements

- Applicants must be a New American (established status as a refugee or an immigrant including first-generation immigrants).
- Pursing training or education in the field of healthcare.
- Resident in the region served by Avera Health.
- Preference shall be given to applicants pursing training or education in entry-level direct patient caregiver careers.
- Preference shall be given to applicants showing financial need.

Deadline

- All application materials must be submitted by March 31 to be considered
- One or more \$1,000 scholarship awarded annually
- All applicants will be notified by July 1

Disbursement

• Fall Semester – \$1,000

Kapaska New Americans in Health Care Scholarship Application Form

Application materials required:			
□ 500-word essay describin	· ·	how completion o	f the educational course
or program will assist in m One letter of recommend services organization. (Lette foundation@avera.org with your Completed application for	dation from a teacher, so er of recommendation should r name and the scholarship in	d be confidential, pleas	sor, or nonprofit social se ask writer to email directly to
Name:			
Mailing Address:			
City:	State:	Zip:	
Cell Phone:	_		
Email Address:			
Name of Course or Program:			
Name of the College/University,	/Technical Institute that	t you are attending	g:
College/University/Technical Ins	stitute location:*City and	l State	
Anticipated date of completion:			
l am a refugee, immigrant, or a	first-generation immigr	ant: Yes	No

If you move before July 1, please email <u>foundation@avera.org</u> with your new mailing address.

It is strongly encouraged to send your completed application form and essay by email to:

<u>foundation@avera.org</u>. Due to security settings, we are unable to open any documents shared in Google Drive, please attach documents to email in PDF or Word format.

*Please use this subject line: Kapaska Scholarship - your name

You may also mail your completed application packet to:

Avera Foundation – Kapaska Scholarship PO Box 5045 Sioux Falls, SD 57117