

**THE DR. MERLE TREWIN MEMORIAL SCHOLARSHIP FUND
SUTTER SOLANO CHARITABLE FOUNDATION**

PURPOSE

The purpose of the Dr. Merle Trewin Memorial Scholarship Fund is to support professional education goals in the health field. Applications will be accepted from Sutter Solano Medical Center employees, SMF West Employees, Touro University students in healthcare related academic programs, and graduating nursing students from Solano and Napa Community Colleges. The Fund provides assistance to individual applicants up to \$1,000 each and are available annually.

The scholarship applications are due by October 31, 2010. A decision will be made by the Selection Committee upon review of your application and verification of submitted references.

Note - Please be aware that your professional references will be verified by a member of the Selection Committee. Professionals who provide such references may call the Foundation office to substantiate applicant's submissions. Applicants whose references are unable to be verified will no longer be considered for an award.

A minimum of three votes from members of the Selection Committee is required for scholarship approval. The Selection Committee reserves the right to consider special circumstances and maintain creative flexibility.

All funds will remain with the Sutter Solano Charitable Foundation in an interest-bearing account until distributed.

ELIGIBILITY CRITERIA

1. A completed application and two (2) letters of recommendation.

Professionals providing references will be called to verify their recommendations, please provide a daytime phone number or call the Foundation office to substantiate applicant's submissions.

2. Submit verification of enrollment in the education program. Your current class schedule is acceptable.

3. SSMC & SMF West Employees must, in addition:

- Be employed in good standing for a minimum of one full year in either a regular full-time or part-time (.5 or above) position. On-call and per diem employees are not eligible at this time.
- Submit a written recommendation from your department manager as one of the required recommendations

Scholarship winners will be asked to be in attendance (or either send a representative) at the annual Tree of Lights Awards Ceremony in December 2010 in order to receive their awards and to attend a Community Committee meeting to share how the Dr. Merle Trewin Memorial Scholarship award is helping to achieve academic goals. Further information will be sent to awardees.

**THE MERLE TREWIN MEMORIAL SCHOLARSHIP FUND APPLICATION
SUTTER SOLANO CHARITABLE FOUNDATION**

PRINT NAME

DATE

EMAIL ADDRESS

PHONE

ADDRESS

CITY

STATE

ZIP

DEPARTMENT (SSMC EMPLOYEES ONLY)

AMOUNT REQUESTED

PLEASE ANSWER THE FOLLOWING QUESTIONS

1. What are your reasons for applying for this Scholarship?
2. What is your Community Service experience?
3. Describe any special factors that explain your need for a scholarship, or circumstances that you feel deserve recognition by the selection committee. (OPTIONAL)
4. SSMC & SMF West Employees Only - Describe program or project for which you are applying. (Additional information may be attached, if necessary.)
5. SSMC & SMF West Employees Only - Explain how this program or project fits into your overall professional growth and achievement goals.

Please return completed applications to:
Sutter Solano Charitable Foundation
300 Hospital Drive
Vallejo, CA 94589
(707) 554-5095 Office