



**William R. Dyon Endowed
Scholarship**

Application & Information Packet

Revised 5/17

Riverside HealthCare Foundation: William R. Dyon Endowed Scholarship

Purpose

The William R. Dyon Endowed Scholarship is intended to promote the professional growth of anyone pursuing a non-nursing Bachelor's Degree at Olivet Nazarene University who has been actively employed at Riverside for a minimum of six months in good standing, has completed their introductory period at Riverside, and is a .5 FTE or greater. The William R. Dyon Endowed Scholarship is for Riverside employees who wish to develop their skills and knowledge—and supports creating possibility of a college education for employees who may have felt a college degree wasn't possible. The fund may be used for tuition and fees for non-nursing Bachelor's degrees at Olivet Nazarene University. Funds may be used to supplement Riverside and non-Riverside tuition reimbursement, grants, and other scholarships—but the award funding may not exceed the cost of tuition and fees for the semester of the award.

Selection Criteria

The selection of the William R. Dyon Endowed Scholarship recipients is based on several criteria, including work performance, recommendation/approval from current leader, essay, and ability to demonstrate readiness for a degree.

Scholarship Recipient Agreement and Understanding

If awarded a scholarship, the recipient agrees to write a personal thank you letter to the donor and/or Foundation Board of Directors, submit grade reports for the previously funded coursework to the Human Resources Department, and may be asked to participate in publicity functions or award ceremonies. Recipients of the 2017 William R. Dyon Endowed Scholarship are expected to attend a thank you luncheon with the donor on July 20, 2017 from Noon to 1:30P at the Kankakee Country Club. Failure to complete any/all Agreements and Understandings may result in denial of future scholarship funding.

Application Process

Completed tuition reimbursement applications for Riverside employees seeking assistance with degree completion must be submitted to the Human Resources Department, before the start date of any coursework for that semester in order to be eligible for this scholarship along with a complete William R. Dyon Endowed Scholarship application. Further review will be completed by Riverside Human Resources and Senior Management. *Incomplete applications will not be eligible to receive a scholarship.*

NOTES:

- *Items to be reviewed may include attendance records, performance evaluations along with a discussion and approval of your application by your Riverside leader. Existence of any corrective actions may be grounds for disqualification.*
- *Following award of an initial scholarship, recipients are eligible to re-apply for future semesters of the William R. Dyon Endowed Scholarship by completing the application and assuring a grade point average that allows successful matriculation to complete the degree.*

Award Information re: the William R. Dyon Endowed Scholarship

For the Fall 2017 semester, the William R. Dyon Endowed Scholarship will be awarded in the amount of:

- \$2700 for .9 to 1.0 FTEs who meet all other eligibility criteria
- \$1350 for .5 to .89 FTEs who meet all other eligibility criteria

For Additional Information, Contact:

Riverside's Human Resources Department or Organizational Development and Learning Department

For Office Use Only: Date received in Human Resources _____
--

**William R. Dyon Endowed Scholarship
Application**

Complete applications and accompanying documents (grades, receipts, etc.) must be received in the Human Resources Department no later than June 9, 2017.

Directions for Completion: Please complete all sections of the entire application. You must be pursuing a non-nursing Bachelor's degree at Olivet Nazarene University to be eligible for consideration.

Note: You must have a hired FTE – not actual worked FTE - of 0.5 (20 hrs per week) to be eligible.

Section I: Personal Information

Name _____ Previous Name _____

Address _____

City, State, Zip _____ Home Phone_(_____)_____

Email _____

Current Academic Degree (e.g. Associates,GED, Diploma) _____

Section II: Educational Plans

Type of Degree desired: _____

College/University: _____

Approximate Date of Completion (including all core & elective courses): _____

Section III: Employment History and Background (must work at Riverside for a minimum of 6 months before the date of this application and have completed their introductory period)

(Please include any breaks in employment)

RMC Hire Date _____ Current FTE Status (0.5 or above)_____

Current RMC Department _____

List all employment, starting with the most recent, up until employment at Riverside HealthCare.

Employer	City/State	Dates

Section IV: Written Statement

Use the space below, or you may attach a **maximum one-page type-written statement** that includes information you believe should be considered in reviewing your application. Please include your responses to the following questions in your written statement:

1. Why do you want to pursue this professional goal?
2. How will this scholarship make what seems impossible—possible for you?

Section V: Course Information:

Name of School	Course Title(s)	Course Code	Semester/ Credit Hours	Start Date	End Date	Costs (Must have receipts/bills attached to application)	
						Tuition/Fees	\$
						Books	\$
						Tuition/Fees	\$
						Books	\$
						Tuition/Fees	\$
						Books	\$

Section VI: Summary of Funds Requested

Please attach bills/receipts for funds being requested and documentation showing receipt of non-Riverside grants or scholarships.

Line 1. Total Cost of Tuition/Fees for this semester/courses listed above (Must attach receipts)	\$
Line 2. Please enter the amount of Riverside Tuition Reimbursement from Human Resources you applied for/received for the current calendar year along with attaching your approved tuition reimbursement application	\$
Line 3. Have you applied for or are you in receipt of any other non-Riverside tuition assistance or financial aid/grants? ____ No (Enter 0) ____ Yes (List the total amount of other tuition funding [non-Riverside grants or scholarships] you have received/will receive for the courses listed on this application, and attach documents showing additional funding.	\$
Line 4. <i>Please add Lines 2. and 3.</i>	\$
Line 5. TOTAL COST of tuition/fees/books for this semester. <i>Subtract Line 4 TOTAL from Line 1 to reach your TOTAL</i>	\$

Section VII: Degree Completion Agreement

Applicant Checklist: (Please check that it is done. If not applicable, please write "n/a" on line. If any item is not addressed, the application will not be considered).

- ___ Receipts for all course tuition and fees are attached.
- ___ Letter of approval or application for tuition reimbursement from Human Resources must be submitted to Human Resources
- ___ Copies of non-Riverside grant and scholarship funding are attached.
- ___ Written statement is attached.
- ___ Grade Report for previously funded applicants is attached showing passing grade of C or above.
- ___ Authorization Review section is complete and signed by applicant.
- ___ Application has been signed by department manager or director.

Authorization Review:

By signing this application form, I attest the information provided on this application is true and accurate. I hereby authorize the review of all information in order that my eligibility for this scholarship be determined.

Please check any/all of the boxes below that apply:

- ☐ I understand, if awarded educational funding I will write a personal thank you letter to the donor and/or Foundation Board of Directors. Must be attached or returned with acceptance letter.
- ☐ I understand I may be asked to participate in any award ceremonies /publicity as requested and that I must attend a luncheon with the donor on July 20, 2017 from Noon to 1:30P at the Kankakee Country Club.
- ☐ I understand it is my responsibility to submit a copy of my final grade reports/proof of course completion to Human Resources and any tuition or fee receipts for reimbursement. *Failure to either complete the course and/or failure to achieve a passing grade may result in denial of reimbursement and/or need to refund monies via direct payment to Riverside).*
- ☐ I understand acceptable academic standards, such as withdrawal from a course or program, may affect my consideration for future funding. I further understand if receiving a Fall 2017 scholarship, does not guarantee future scholarship awards in subsequent semesters and that scholarship awards are subject to change.

Print Applicant Name

Signature of Applicant

Date Signed

APPLICANT: *Please meet with your leader and to discuss your application and/or obtain approval.*

My signature below represents I have checked this application for completion and discussed the application with my employee along with his/her tuition reimbursement application. My signature also represents my full support and recommendation of this employee for the William R. Dyon Endowed Scholarship and that this employee is in good standing at Riverside, .5 FTE or greater, has completed at least six months of employment at Riverside, and has also completed his/her introductory period.

Signature of Riverside Leader/Supervisor/ Director or Designee

Date Signed

Following Immediate Leader's signature, send the application and attachments to the Human Resources Department no later than June 9, 2017 to be eligible for consideration.

My signature below represents that I have reviewed this application and affirm this employee is in good standing and meets all other listed eligibility criteria including having applied for tuition reimbursement.

Signature of Vice President, Human Resources or Designee

Date Signed