



Scholarship Opportunity from Salal Credit Union

Salal Credit Union believes that to have healthy communities, residents must have access to affordable, quality healthcare. We believe that Washington Business Week (WBW) is an excellent, innovative way to promote healthcare as a desirable career option for young people.

In order to recognize outstanding students in the Washington Business Week Healthcare Pathway program held at Pacific Lutheran University (PLU) and to support the local healthcare industry, Salal Credit Union is offering two \$2,500 scholarships for Washington Business Week participants who intend to pursue education and a career in healthcare.

In order to be eligible, the student must:

- be a Washington State resident,
- be a current participant in the 2011 WBW Healthcare Pathway program held at PLU,
- be enrolled in high school, home schooled or a just-graduated high school senior (2011 academic year),
- express a desire to pursue further education and a career in the healthcare industry,
- maintain or have maintained a minimum 2.5/4.0 GPA for his or her senior year of high school,
- complete a scholarship application and fulfill all application requirements, and
- have a completed and signed waiver from parent or guardian, if younger than 18.

The winner—determined by a panel of Salal Credit Union employees—will be chosen from among those eligible students who complete the application process. The application process will consist of:

- a scholarship application,
- a form to include biographic information and GPA, for determining eligibility,
- an essay on the subject, "Why do you want to pursue a career in the healthcare industry?" and
- recommendations from Business Week staff and/or Company Advisors, who will be watching for students who display extraordinary leadership, innovation and teamwork.

Important information for applicants:

- If you are under 18 years of age, you will need to get permission from a parent/ guardian to enter the scholarship competition. Please have your parent/ guardian complete and sign the attached waiver.
- All entries must be received at Salal Credit Union by August 3, 2011. You may email your entry and waiver to news@salalcu.org or print out the entry and waiver and mail them to: Salal Credit Union, PO Box 19340 Seattle, WA 98109. ATTN: Scholarship Selection Committee.
- You understand that by participating in this scholarship competition, you are allowing Salal Credit Union to use your name, image and information on our website and other marketing materials. Salal will not provide information beyond your name, age, the school you attend and relevant details from your essay (hobbies, experience with health care industry, etc.)



Salal Credit Union – 2011 Application

WASHINGTON BUSINESS WEEK – HEALTHCARE PATHWAY SCHOLARSHIP

Email entry and waiver to news@salalcu.org, fax to 206.826.7692 or mail to: Salal Credit Union, PO Box 19340 Seattle, WA 98109.
ATTN: Scholarship Selection Committee. Entries are due August 3, 2011.

Name:

Date of Birth:

Grade (just completed) and GPA:

School:

Are you a resident of Washington State: Yes No *(Must be a resident in order to apply.)*

Tell us about any of your volunteer work, interests and hobbies that are related to health care:

In 300-500 words, please answer the following question (you may use more than one page, if necessary): ***Why do you want to pursue a career in the healthcare industry?***



Parental Consent Waiver/Release of Liability

FOR GOOD AND VALUABLE CONSIDERATION, including permission for _____
to participate in the **2011 Salal Credit Union Washington Business Week Healthcare Pathway Scholarship program** (“program”), I, the parent/guardian of the minor for myself and on behalf of the minor:

Consent to the minor’s participation in the program and

1. release, waive, discharge and relinquish Salal Credit Union and their officers, employees, and agents from any liability, loss damage, claim demand or cause of action against them attributable to the minor’s participation in the program, and
2. agree that photographs, pictures, slides, movies or videos of the minor or myself may be taken in connection with the minor’s or my participation in the program without compensation from Salal Credit Union, and consent to the use of photographs, pictures, slides, movies or videos for any legal purpose.

A PARENT AND/OR APPLICANT MUST SIGN BELOW IN ORDER FOR THE APPLICANT TO BE ELIGIBLE FOR CONSIDERATION. SCHOLARSHIP APPLICANTS 18 OR OLDER MAY SIGN FOR THEMSELVES.

THE PARENT/GUARDIAN OR APPLICANT HAS READ AND SIGNS THE WAIVER AND RELEASE OF LIABILITY AND DOES SO VOLUNTARILY.

I certify that I am the (choose one)

Parent

Guardian

Applicant (18 years or older)

PRINTED NAME

SIGNATURE

DATE
