

NJHIMSS Scholarship application

Please complete the form below, which contains information about why you feel you are the best candidate for the available scholarships. You will be asked to submit a short 500 word essay, and your college transcripts.

EMAIL THE COMPLETED FORM TO: ???

First Name	
Last Name	
Email address	
Mailing address	
City	
State	
Zip	
College/University	
Degree Program	

Award Choice: *

- Katrina Kehlet Graduate Award
- The Veterans Award
- The Undergraduate Award

How do you intend to impact the arena of Healthcare Informatics and/or Healthcare Technology? (500 word maximum)

A copy of your Transcript is required. (Please attach a copy transcript)