Thank you for your interest in Suburban Hospital’s educational opportunities. We currently offer two scholarship programs. Current employees may be eligible for the Casey Scholars Program or the Suburban Hospital Scholars Program, as well as a generous tuition reimbursement program. Non-employees are only eligible for the Casey Scholars Program and only if they are studying nursing.

For both programs – the Casey Scholars Program and the Suburban Hospital Scholars Program – the amount of the scholarships awarded will vary depending on the costs associated with the program. All scholarships are awarded based upon actual expenses for books, tuition and fees per academic year and the availability of funds. Suburban Hospital reserves the right to modify financial support based on actual expenses. An application, references, and interview are required. Funds awarded as scholarships will be sent directly to the schools.

Scholarship recipients must commit to working at Suburban Hospital for a minimum of one year, or commensurate with the amount of financial support received. In the event that a scholarship recipient does not fulfill his or her work commitment, the scholarship must be repaid. Depending on financial situations, scholarship recipients may have income tax liability for all, or part, of their scholarship awards.

**THE CASEY SCHOLARS PROGRAM**

Since 2003, The Eugene B. Casey Foundation has committed to providing support for the undergraduate, graduate and continuing education of nurses and other key caregivers by funding the Casey Scholars Program at Suburban Hospital. This program is designed to assist Suburban Hospital in providing optimal care to patients by increasing its number of new nurses, while retaining and strengthening its existing staff of caregivers through advanced and graduate training opportunities.

Scholarships are offered to employees and non-employees individuals entering into a basic (RN; RN to BSN; accelerated BSN) nursing program; and to employees pursuing advanced practice (MSN; Ph.D.; DNP) nursing program or graduate study in other fields when there is an identified need at Suburban Hospital. There is a preference for candidates in their last two years of study and all recipients must maintain a 3.0 GPA (on a 4 point scale).

In addition to contributing to the supply of registered nurses in the workforce, Casey scholarships may finance internships in specialty areas, certifications and leadership development programs for Suburban Hospital employees.

**THE SUBURBAN HOSPITAL SCHOLARSHIP PROGRAM**

The Suburban Hospital Scholarship Program is designed to promote the recruitment and retention of individuals who are currently working at Suburban Hospital and want to further their careers through education. Since 1989, scholarships have been available to candidates who have been accepted into accredited programs in nursing and allied health areas where there is an identified need such as:

- Radiology / Respiratory / Medical Technology
- Physical or Occupational Therapy
- Physician Assistant
- Pharmacy

April 2021
A grade point average of 2.5 (on a 4 point scale) is required to apply, and must be maintained in order to retain the scholarship.

**TUITION REIMBURSEMENT / EDUCATION ASSISTANCE**

Tuition Reimbursement is also available to all full-time and part-time regular employees at Suburban Hospital. The maximum amount for full-time employees is $5,250 and part-time is $2,625 per calendar year. Employees must complete the course(s) with a passing grade before seeking reimbursement.

Funding is also available to full and part time employees for the education required for certification/re-certification to a maximum of $500 annually.

**TO BE CONSIDERED**

To be considered for either a Casey Scholarship or Suburban Hospital scholarship, you must complete and provide the following information:

- An application;
- Two letters of recommendation from academic or professional sources who are familiar with your work/study habits;
- A letter of acceptance or good standing from the program in which you are enrolled;
- An official copy of your college transcript(s);
- A statement of tuition, fees and expenses for your program.

The application deadline is May 31 for consideration for the fall semester; November 30 for consideration for the winter term.

*Please submit your application to:*

Suburban Hospital  
8600 Old Georgetown Road  
Bethesda, Maryland 20814  
ATTN: Scholarship Committee/Community Relations

If you have any questions, please feel free to contact (301) 896-3916.

Leslie Ford Weber  
Director, Government & Community Affairs for Montgomery County
APPLICATION
SUBURBAN HOSPITAL SCHOLARSHIP PROGRAMS

I wish to be considered for the following scholarship (you may check both if eligible) –

- **Casey Scholars**  
  **Eligibility:** Non-employees who are accepted to or enrolled in a basic nursing program. Current employees studying basic or advance practice nursing or graduate study in other fields when there is an identified need at Suburban Hospital. Minimum GPA is 3.0.

- **Suburban Hospital Scholarship Program**  
  **Eligibility:** Current employees who have been accepted to or enrolled in Nursing or an allied health program, such as Radiology, Respiratory, Medical Technology, Physical Therapy, Occupational Therapy, Physician Assistant or Pharmacy, where there is an identified need. Minimum GPA is 2.5.

Name: ___________________________________________  Student ID: ___________________________

Address: _____________________________________________________________________________

Email: ________________________________________________________________________________

Telephone: Home ( )_________________________ Mobile: ( )__________________________  
Work: ( )________________________________________

If you are currently employed at Suburban Hospital, please supply the following information:

Department _______________________________  Position _____________________________

Avg hours per week _________________

**Academic History:**

<table>
<thead>
<tr>
<th>School &amp; Location</th>
<th>Field(s) of Study</th>
<th>Years Attended</th>
<th>Degree Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>HighSchool</td>
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<td></td>
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</tr>
<tr>
<td>Undergraduate</td>
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<td></td>
</tr>
<tr>
<td>Graduate</td>
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</tr>
</tbody>
</table>

**Professional Licensure, Certification:**  
(please list)_____________________________________________________________________________________

**Program in which you are enrolled (for which you seek scholarship):**

School Name and Location: _______________________________________________________________________

Field of Study: ________________________________________  Current GPA: ______________________

Credits taken: ______  Credits needed to graduate : ______  Expected Completion Date: ___________________
Employment History:

<table>
<thead>
<tr>
<th>Position</th>
<th>Employer</th>
<th>Hours/week</th>
<th>Dates from / to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current</td>
<td>___________________________</td>
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</tr>
<tr>
<td>Prior</td>
<td>___________________________</td>
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<tr>
<td>Prior</td>
<td>___________________________</td>
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</tbody>
</table>

Other interests, hobbies, leadership roles, volunteer activities, etc.
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Costs: Please provide an estimate of your program costs for the next 12 months (July-June for spring applicants or January-December for fall applicants) for which you are applying for scholarship support.

Number of semesters/terms/quarters you will be enrolled in the 12-month period: __________

Dates: __________________

Tuition $_______________
Books $_______________
Required fees $_______________
TOTAL $_______________

Other support: Please indicate if you will be receiving any of the following types of support and the anticipated amount.

Tuition reimbursement $_______________
Scholarships / Grants $_______________
Loans $_______________

The information given above and in the attached essay is true and accurate to the best of my knowledge.

_________________________________________  ______________________________
Applicant Signature  Date
APPLICATION ESSAY
SUBURBAN HOSPITAL SCHOLARSHIP PROGRAMS

In 300 words or less, please discuss your motivation for choosing this career direction, your career goals, and your plans to achieve them. (If you are not currently living in the mid-Atlantic region, please also describe your interest in relocating to Maryland in order to fulfill the work commitment.)