



NATIONAL ASSOCIATION OF HEALTH SERVICES EXECUTIVES

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Abu Dhabi, United Arab Emirates

1050 Connecticut Avenue, NW
5th Floor
Washington, DC 20036
T: 202.772.1030
F: 202.772.1072
nahsehq@nahse.org
www.nahse.org

April 1, 2021

Dear Student Member:

Enclosed please find the National Association of Health Services Executives (NAHSE) scholarship application. Scholarships are valued at \$5,000 and have been developed by NAHSE to support and encourage African American students to pursue a career in healthcare management. Scholarship winners will also receive complimentary registration, lodging, and airfare to attend the 36th Annual NAHSE Educational Conference and to accept their award. (Note: Announcements will not be made prior to the conference)

The following scholarships are awarded to graduate students attending accredited institutions to help defer tuition costs for the 2021-2022 academic year.

The Haynes Rice Award: The Haynes Rice Award is bestowed by NAHSE to outstanding *graduate students* who are striving to become future leaders in healthcare management and NAHSE.

The Florence Gaynor Award: The Florence Gaynor Award was established to recognize outstanding achievements among *female graduate students* who are striving to become future leaders in healthcare management and NAHSE.

The Ellis Bonner Award: The Ellis Bonner Award is a special category to recognize the distinguished leadership and academic achievement among *non-traditional graduate students* who are striving to become future leaders in healthcare management and NAHSE.

We realize that finances are often a barrier to completing academic programs; therefore, we hope students who are in financial need will be encouraged to apply for a scholarship.

Students who wish to apply must e-mail their completed application by **June 30th, 2021** to NAHSEawards@gmail.com.

The application must include the following:

- Cover Letter
- Application Portfolio Checklist
- Scholarship Application Form
- Personal Statement
- Official College Transcripts
- Current Resume
- Three (3) Letters of Recommendation
- Personal Photo (3 x 5)
- NAHSE Student Membership Application and 2021 dues (All applicants must be a NAHSE member.)

Please note that incomplete applications will not be considered.

The enclosed materials are for your use and dispersal to other interested students. If you need additional information, please contact NAHSEawards@gmail.com. Thank you for your interest in these scholarship opportunities and your continued support of NAHSE.

Sincerely,

Susan Burroughs & Maha Taylor
Co-Chairs, NAHSE Awards and Scholarship Committee

NATIONAL ASSOCIATION OF HEALTH SERVICES EXECUTIVES SCHOLARSHIP ELIGIBILITY AND APPLICATION REQUIREMENTS

Eligibility Requirements

- Applicant must be an African American graduate student enrolled in an accredited college or university program, pursuing a Master or Doctorate Degree, and majoring in healthcare administration or a related field.
- Applicant must be matriculating during the 2021-2022 academic school year.
- Applicant must be able to demonstrate financial need.
- Applicant must have a minimum grade point average (GPA) of 3.0 on a scale of four (4.00).
- Applicant must be a NAHSE member
 - Applicants that are not already members must submit their NAHSE student membership application (available at www.nahse.org) and 2021 dues along with their scholarship application

Application Requirements

Please submit one application portfolio and indicate your scholarship of interest (if any). Applicants will be considered for all applicable awards.

- Cover Letter
- Application Portfolio Checklist
- Scholarship Application Form
- Personal Statement (up to 3 pages, double spaced, 10-12 point font, 1 inch margins)
Please describe self, career goals, commitment and interest in health care management, and need for financial assistance.
- Official College Transcript(s) from all Institutions
- Current Resume
- Three (3) Letters of Recommendation (according to the enclosed directions)
- Personal Photo (3 x 5 head shot)
- NAHSE Student Membership Application and 2021 dues

**NATIONAL ASSOCIATION OF HEALTH SERVICES EXECUTIVES (NAHSE)
SCHOLARSHIP APPLICATION**

PLEASE PRINT OR TYPE

Mr./Mrs./Ms. _____ Date: _____
Last Name First Name M.I.

Permanent Address: _____
(Street) (City) (State) (Zip Code)

Home Phone: _____ School Phone: _____

Birth Date: _____ Social Security # (will not be shared): _____

Name and Address of Institution attending:

Classification in School (Degree/Level) _____ Student Status: __ Full Time __ Part Time

Approximate yearly family income: _____

Number of dependents in immediate family: _____

Your present academic major or the major you intend to pursue (i.e., in health care administration):
_____ Grade Point Average: _____

Community and extracurricular activities:

Certificates and Awards:

FINANCIAL DATA REQUIRED

FINANCIAL ASSISTANCE (Please specify amounts for the 2021-2022 academic year)

Scholarships (amount) _____	Work-study (amount) _____
Loans (amount) _____	Stipend (amount) _____
Are you currently working? __ YES __ NO	Monthly Expenses (amount) _____
Yearly Tuition (amount) _____	

SIGNATURE OF APPLICANT _____

Please complete this application in full and e-mail with required documents by June 30, 2021.

**NATIONAL ASSOCIATION OF HEALTH SERVICES EXECUTIVES
GUIDELINES FOR SCHOLARSHIP LETTER OF RECOMMENDATIONS**

Three (3) letters of recommendations should be received. 2 letters must come from an academic reference (official letterhead required) and at least 1 of these must be a faculty member in your major area of study. 1 letter must come from a non-academic reference (employer or community service). Recommendations from relatives of the applicant are not acceptable. Persons writing the letter of recommendation should include in their letter answers to the following questions:

1. What is your relationship to the applicant and how long have you known him or her?
2. Please indicate the specific reasons why you are recommending the applicant for the scholarship.
3. Do you think the applicant possesses leadership ability and in what ways have they displayed it?
4. Please describe in as much detail as possible the applicant's strengths and weaknesses.
5. Please give an assessment of the applicant's oral and written communication skills, and his or her ability to relate interpersonally with all levels of management.

**NATIONAL ASSOCIATION OF HEALTH SERVICES EXECUTIVES
SCHOLARSHIP APPLICATION PORTFOLIO CHECKLIST**

Please include the following items in your packet:

- Cover Letter
- Application Portfolio Checklist
- Scholarship Application Form
- Personal Statement
- Official College Transcript(s) from all Institutions
- Current Resume
- Three (3) Letters of Recommendation (according to the enclosed directions)
- Personal Photo (3 x 5 head shot)
- NAHSE Student Membership Application and 2021 dues (All applicants must be a NAHSE member)

We recommend that you assemble all materials and send them in one packet to the NAHSE Awards e-mail. If any materials need to be sent separately from your packet, please note them below and where or who they are being sent from.

Email: NAHSEawards@gmail.com