

Steward Health Care Scholarship Form

Date _____

Student ID # _____

Name on Record

Labouré College of Healthcare Scholarship for Steward Health Care Employees

Verification of employment required to receive this scholarship. Students in degree or certificate programs who work at least 16 hours per week at a Steward Health Care facility receive a scholarship for 25% of the cost of their courses. Students who work at least 8 but less than 16 hours each week receive a scholarship for 10% of the cost of their courses. Applicable to these programs: ASN, Radiation Therapy, & Neurodiagnostic Technology. This form must be submitted prior to semester start date to receive the benefit for that semester.

Students are allowed up to one per semester of the following College scholarships: Alumni Tuition Benefit*, Catholic High School*, Steward Health Care Employees*. If multiple scholarships apply, the scholarship with the most benefit to the student will be posted to the account. Students can receive certain College scholarships, or a tuition benefit only once per course.

Name of Steward Facility: _____

Employment start date: _____

Supervisor: _____

Supervisors' Signature: _____

Average hours worked per
week: _____

By completing this form you are authorizing Labouré College of Healthcare to contact your employer to verify your employment status.

Student Signature: _____ Date: _____

Complete and return to:
Labouré College of Healthcare
Attn: Student Accounts
303 Adams Street
Milton, MA 02186
Fax: (617)296-7947

Email: StudentAccounts@laboure.edu