



Rural Health Association of Utah

Student Scholarship Application

2026 Cycle

Description: The Rural Health Association of Utah (RHAU) Student Scholarship Program awards scholarships of up to \$1,000 to qualifying students. The program is designed to support students who come from rural communities across Utah who are pursuing careers in healthcare. According to the AAMC, medical students who grow up in small communities far from urban centers are much more likely to return to practice. The goal of the RHAU Student Scholarship Program is to support rural students entering healthcare who desire to return to rural communities in Utah to join the rural healthcare workforce.

The RHAU Student Scholarship Program awards scholarships to **1)** high school seniors, **2)** undergraduate students pursuing careers in healthcare, **3)** students attending bachelors level health training programs, and **4)** students attending graduate level healthcare training programs.

Scholarship Tracks: There are two available tracks for applicants to select from.

- o **Track 1: General Healthcare:** Physicians, Physician Assistant, Nursing (BSN or above), Dentistry, Dental Hygiene, Physical/Occupational Therapy, Pharmacy, etc.
- o **Track 2: Public Health and/or Prevention:** Bachelors in Public Health or Population Health, Masters in Public Health, Masters in Prevention Science, etc.

Eligibility Requirements

- MUST be graduating from or have graduated from high school in one of Utah's 24 rural designated counties
- MUST be pursuing a degree in a healthcare related field
- MUST be attending or planning to attend a university with a physical campus in Utah
 - o Online students are eligible to apply, but the university must have a physical campus located in Utah.
- A GPA of 3.0 or higher
- ***NOTE:** Previous scholarship recipients are **NOT** eligible to apply again.

Deadline to Apply: March 31, 2026 at 5:00 p.m.

How to Apply: To be considered for a RHAU student scholarship, please complete all parts of this application packet, and submit via email to info@rhau.org by the deadline above.

Application Checklist:

- o Completed RHAU Student Scholarship Program Application Packet
- o Signed Photo Release (Included in the packet)
- o Class photo or headshot
- o 1-2 Letters of Recommendation



2026 RHAU Student Scholarship Application

Applicant Information

Full Name: _____ Date of Birth: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Phone Number: _____

Home Town: _____

High School: _____ Year of Graduation: _____

College Attending (or Planning to Attend): _____

Are you a first-generation student? Yes: ____ No: ____

Do you qualify for Federal Financial Aid? Yes: ____ No: ____ I don't know: ____

Are you currently a member of the RHAU student chapter? Yes: ____ No: ____

Have you applied for a RHAU Student Scholarship previously? Yes: ____ No: ____ Year: ____

For High School Students Only:

Parent/Guardian's Name: _____

Parent/Guardian's Email: _____ Phone: _____

Scholarship Track:

Please select the scholarship track you are applying for:

Track 1: General Healthcare

Track 2: Public Health and/or Prevention

Academic Information:

High School GPA: _____ High School Class Ranking: _____ SAT/ACT Score: _____

College GPA (If Applicable): _____ College Credits Completed: _____

Intended/Current Field of Study: _____

Expected Graduation: _____ Is this your terminal degree? Yes: ____ No: ____

If you plan to pursue additional degrees, please share what additional degrees you intend to pursue: _____

Do you plan to work in rural Utah after completing your education? Yes: ____ No: ____ Unsure: ____



Essay Questions:

Question 1: Describe a moment, experience, or challenge that shaped your understanding of healthcare in rural Utah. How has this influenced your educational goals and your vision for serving rural communities? **(250 words or less)**



Question 2: (TRACK 2 APPLICANTS ONLY) Describe any experiences you have had related to prevention and/or public health. How have these experiences shaped your understanding of the field and influenced your career goals? **(250 words or less)**



RURAL HEALTH ASSOCIATION OF UTAH

MEDIA PERMISSION FORM

I, _____, hereby consent to the Rural Health Association of Utah permission to use photographs, videos, or other media provided as part of this application to the RHAU Student Scholarship Program for any legal use, included but not limited to, publicity, illustration, advertising, and web content.

Signature: _____ Date: _____

Name: _____

Hometown: _____

If under the age of 18, please provide signature of parent or guardian

I hereby consent to the Rural Health Association of Utah permission to use photographs, videos, or other media provided as part of this application to the RHAU Student Scholarship Program for any legal use, included but not limited to, publicity, illustration, advertising, and web content.

Signature: _____ Date: _____

Parent or Guardian's name: _____



Letters of Recommendation

Provide 1-2 letters of recommendation from a teacher, professor, healthcare professional, or community leader who can speak to your commitment to rural healthcare. Letters should be on official letterhead and signed. Please ensure the letter writer includes the recommenders name, title, and contact information.

Additional Information

Is there anything else you would like the scholarship committee to know about you?

Signature:

By signing this application, you are attesting that all information provided is accurate and honest. You are also acknowledging that any falsification of information on this application may result in disqualification from the RHAU Student Scholarship Program.

Signature: _____ Date: _____

Full Name (Printed): _____

If applicant is below 18 years of age

Parent/legal guardian signature: _____

Parent or legal guardian name (Printed): _____

Date: _____