



# Eugene Oriol Memorial Scholarship

## 2018 Scholarship Application

### MISSION

The Oriol Foundation is organized exclusively for charitable and educational purposes including, but not limited to enriching the lives of those who deliver this care; to promote wellness and stimulate innovations in healthcare so all may live more independently and safely wherever they call home in the Wachusett community.

### BACKGROUND INFORMATION

Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Town

Telephone #: \_\_\_\_\_ Date of Birth \_\_\_\_\_

College, School or Program Planning to Attend: \_\_\_\_\_

Intended Degree or Certificate: \_\_\_\_\_

High School Name and Town: \_\_\_\_\_

Guidance Counselor's Name: \_\_\_\_\_

### APPLICANT ESSAY (500 WORDS OR LESS) (Please attach sheet)

Please explain your interest and intentions in the healthcare field.

Date: \_\_\_\_\_  
Signature of Applicant

### Mail completed application along with essay to:

The Oriol Foundation Scholarship Committee, 52 Boyden Rd Suite 209,  
Holden, MA 01520.

Or email to: [Scholarship@OriolHealthCare.com](mailto:Scholarship@OriolHealthCare.com)

Deadline to apply is May 13, 2018