Dear Applicant:

Thank you for your interest in the Helen Bodin Harris Scholarship for Nursing Education. This scholarship program is made possible through private donations to the Helen Bodin Harris Memorial Nursing Education Endowment Fund.

This is a special program for LVN's who wish to become a Registered Nurse (RN) and for RN's to pursue advanced studies (BSN, MSN, or MBA) in the nursing profession. Scholarships of $1,000 are available to Registered Nurses and Licensed Vocational Nurses who have enrolled, or are enrolling, in accredited college courses. Applicants must be employed full time or part time and actively at work (not on a leave of absence). Applicants must also have fulfilled a minimum of six months' continuous service with their current employer.

Please complete the attached scholarship application and submit to EMC Health Inc., 2881 Geer Road Suite A, Turlock CA 95382 no later than June 28, 2019.

We look forward to receiving your application documents. Please do not hesitate to contact me at (209) 664-5180 should you have questions or need assistance with the application process.

Sincerely,

Linda Stuhmer
President and CEO
EMC Health, Inc.
Helen Bodin Harris

Helen was a full-blooded Swede, whose mother immigrated to the United States from Sweden in 1903. Helen’s father was also Swedish, but was born in Kansas. Helen was a life-long Turlock resident. Growing up on her parents’ farm in Turlock, she attended Turlock schools graduating from Turlock High School.

In 1947, Helen married Robert ("Bob") Harris, the father of two young children, Robert Jr. and Terry, ages six and five, respectively. Helen rescued the young widower and his children and gave them a lifetime of love. She was always "Mom" to Robert and Terry. Bob and Helen were happily married for over 55 years at the time of her death.

From 1942 to 1967, Helen worked at the Post Office in Turlock. She was one of the first female employees at the Turlock Post Office. She worked the front window and welcomed each customer with a smile.

Bob and Helen enjoyed working with the young people in their church, traveling and taking care of their family and friends. Helen loved gardening and her yard blossomed under her meticulous care. She was an expert seamstress and made many of her clothes, as well as some of Bob’s clothes. Helen was an accomplished artist, who excelled at painting with oil. Helen was also a skilled baker and enjoyed baking breads, rolls, pies and cookies for her children and grandchildren to savor. Helen was a beloved wife, mother, grandmother, and great-grandmother.

Helen spent the last 57 days of her life as a patient at Emanuel Medical Center. As her health deteriorated, Helen and Bob felt blessed by the care provided by many compassionate nurses. In honor of these wonderful, caring people who helped Helen and her family through this difficult time, the family of Helen Bodin Harris has established the Helen Bodin Harris Scholarship for Nursing Education. This scholarship fund will memorialize and honor Helen Bodin Harris’ respect for education and grateful appreciation for excellence in nursing care.
The Helen Bodin Harris Scholarship for Nursing Education

APPLICATION

Application deadline is June 28, 2019.

Return completed application to EMC Health Inc., 2881 Geer Road Suite A, Turlock, CA 95382

NAME
Last: _______________________________ First: _______________________________

ADDRESS
Street: ________________________________________________________________

City: ___________________________ State: ______________________ Zip: ____________

PHONE
Home: ________________ Work: ____________________ Other: ____________________

PREVIOUS EDUCATION
College: ________________________________________________________________

Major Course: ________________ Years Completed: ___________________________

Degree: ________________________

Training
School: ______________________ Years Completed: _________________________

Technician/Certificate Number: ________________ Expiration Date: ____________

California RN Number: ________________ Expiration Date: ________________

CURRENT ENROLLMENT
College: ________________________________________________________________

(Please attach verification of enrollment in program at accredited college.)

Program in which you are currently enrolled:  □ BSN/MSN/MBA  □ RN

EDUCATIONAL GOALS
Please state your educational goals: __________________________________________

________________________________________

EMPLOYMENT
Current employer: _________________________________________________________

Current Department: ______________________________________________________

Current Title: ____________________________________________________________

How long have you been with your current employer? __________________________

Status:  □ Full Time  or  □ Part Time

Signature of Applicant ___________________________ Date ________________