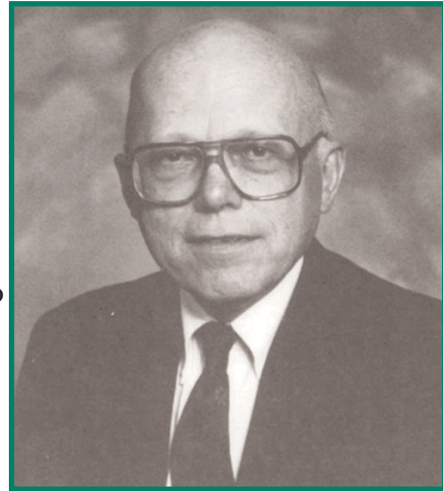


L.A. HOLLINGER, M.D. SCHOLARSHIP

The L.A. Hollinger, M.D. Scholarship was established to honor Dr. Hollinger's contributions as a physician, educator, and colleague. The intent of this scholarship is to promote his strong commitment to education with the emphasis on continually improving the quality of patient care and ensuring the continued preparation of future nurses and respiratory therapists to meet that objective. The scholarship is awarded to those who are currently pursuing a Nursing or Respiratory Therapy undergraduate or graduate degree.



1933 – 1993

Dr. Hollinger received his medical degree, did his residency and was a fellow at Kansas University School of Medicine. In 1967 he joined the staff of Baptist Medical Center. Through the years, Dr. Hollinger made significant personal and professional contributions not only to Baptist Medical Center but to the community as well.

Among those accomplishments:

- *Founder and director of the Department of Pulmonary Medicine, 1967-1991*
- *Founder and director of Johnson County Community College School of Respiratory Therapy, 1967-1991*
- *President of Baptist Medical Center Medical Staff, 1978-1979*
- *Vice-president of Medical Affairs at Baptist Medical Center, 1992-1993*

Awards:

- *Baptist Medical Center Physician of the Year, 1977*
- *Baptist Medical Center Teacher of the Year, 1980 and 1986*

It is our desire that the recipients of this scholarship continue Dr. Hollinger's spirit and dedication to the delivery of quality patient care.

L.A. HOLLINGER, M.D. SCHOLARSHIP

GENERAL INFORMATION

- Scholarships will be awarded only to those currently enrolled in an accredited Nursing or Respiratory Therapy program.
- Scholarships for Nursing students will be for tuition assistance and will be sent directly to the college of the recipient's choice.
- Scholarships for Respiratory Therapy students will be for payment to the National Board for Respiratory Care for the applicant to take the Certified Respiratory Test (CRT) and the Registered Respiratory Test (RRT). Tests must be taken within 18 months from date of NBRC eligibility.
- Nursing applicants do not need to submit this application. Your Trinity Lutheran Scholarship application will be used instead.
- All applications must be submitted or postmarked by May 15th.

QUALIFICATIONS

1. All applicants must have a cumulative GPA of 2.5.
2. All nursing applicants must be a recipient of a Trinity Lutheran Hospital School of Nursing Alumnae Scholarship for the current year.
3. Respiratory Therapy applicants must be enrolled in the Respiratory Therapy program at either Johnson County Community College or the University of Kansas.

L.A. HOLLINGER, M.D. SCHOLARSHIP

APPLICATION

Mr. Mrs. Ms.

Name _____
Last First Middle

Address: _____
Street Apt. City State/Zip

Phone: (_____) _____ (_____) _____
Home Work

Email Address: _____

School/College you currently attend: _____
(or anticipated graduation date)

Cumulative GPA _____ Anticipated date of graduation: _____

Current/Previous Education *(Please attach official transcript)*

Institution	Area of Specialty/Degree	Date Graduated
_____	_____	_____
_____	_____	_____
_____	_____	_____

Work Experience for past five years *(List most current position first)*

Employer	Dates	Position/Specialty
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Professional or Community Memberships/Activities

Organization	Year	Position/Activity
_____	_____	_____
_____	_____	_____
_____	_____	_____

L.A. HOLLINGER , M.D. SCHOLARSHIP

References: Provide a minimum of two references, which may include, but are not limited to faculty, counselors or supervisors. Each reference should send a personal letter of reference DIRECTLY to Baptist-Trinity Lutheran Legacy Foundation, 6675 Holmes Road Kansas City, MO, 64131 . Each letter of reference must include the author's relationship to the applicant.

Name	Address	City/State/Zip	Phone	Years Known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PLEASE ENCLOSE OFFICIAL TRANSCRIPTS PLUS A PERSONAL STATEMENT WHICH SHOULD ADDRESS:

- Reason(s) for applying for scholarship
- Reason(s) for selecting nursing or respiratory therapy as a career
- Career objectives upon graduation or licensing

FOR ALL APPLICANTS:

I certify that the statements made in this application packet are correct to the best of my knowledge. Any falsification may result in a forfeiture of the scholarship. I understand that the committee may verify any or all statements in this application. Additional information may be requested at a later date as per the discretion of the selection committee. The award will be made with no regard to race, age, sex, disability, religion or national origin.

Signature _____

Date application submitted _____

REMINDER

APPLICATION MUST BE SUBMITTED OR POSTMARKED BY MAY 15th

Please submit all necessary information to:

Baptist-Trinity Lutheran Legacy Foundation
6675 Holmes Rd., Suite 470
Kansas City, MO 64131
(816) 276-7555

For more information this and other scholarships, please visit our website: www.btlif.org