

## HIMAH SCHOLARSHIP APPLICATION

Submit completed application to:

**HIMAH Scholarship**  
PO Box 22314  
Honolulu, HI 96823-2314

### Information for Applicant

HIMAH recognizes scholarship and professionalism as characteristics needed to succeed as health information professionals. To assist qualified Health Information Technology (HIT) students in the state of Hawaii to earn AHIMA certification, HIMAH offers a scholarship to an outstanding student member of AHIMA/HIMAH in accredited Hawaii schools offering a degree in HIT through CAHIM. The scholarship is in the amount of \$250. Applications with required attachments must be submitted to HIMAH by:

**March 15** (January quarter), **May 15** (April quarter), **September 15** (July quarter), **December 15** (October quarter) to be considered. HIMAH Board of Directors expects to notify the award recipient within four weeks of the submission deadline.

### Criteria:

1. The applicant must be a student in their final quarter of the program.
2. The applicant must be a student member of AHIMA.
3. The applicant must have a cumulative grade point average of 3.0 or higher on a 4.0 scale.
4. The applicant must demonstrate financial need.
5. The applicant must demonstrate dedication to the profession.

### Instructions for Completing the Application Process

1. Submit the completed application with other materials to the HIMAH Scholarship at the HIMAH PO Box address above.
2. Submit a copy of the most recent transcript. (*Note:* Does not need to be an official copy.)
3. Submit three personal letters of recommendation.
4. Submit proof of application for certification exam.
5. Submit an essay in response to all questions asked in "Future Goals" section at the bottom of this form.



**Name of Applicant: (Please print)** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email** \_\_\_\_\_

**Education:**

Name and location of High School \_\_\_\_\_

Name of Other Colleges/Universities Attended \_\_\_\_\_

Other degree(s) Earned \_\_\_\_\_

\_\_\_\_\_ Current Degree \_\_\_\_\_

Major \_\_\_\_\_

**Employment History**

List the most recent work experience (three only) identifying the company/agency and the type of work performed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Financial Requirements**

Describe your financial circumstances and needs.

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Future Goals Essay**

Describe below your future plans as a health information technology practitioner. This section should address at least the following:

1. Why did you choose Health Information Technology as a career?
2. What do you think the Health Information Technology profession will do for you?
3. What contributions do you feel you can make to the profession?
4. Why did you apply for the HIMAH Scholarship?

I hereby certify that the information provided by me on this application is true and correct to the best of my knowledge. I agree to the conditions outlined.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date