



2025

Louis J. LaCroce Medical/Health Sciences Scholarship

The Weller Foundation, Incorporated

Overview

This **\$7,000 scholarship** encourages and financially assists students who have chosen a course of study leading to a degree in Medical/Health Sciences upon graduation. It was renamed in 2020 to honor former Trustee Louis J. LaCroce.

Healthcare careers, which provide one-on-one healthcare to people, acceptable under this program are:

- Emergency Medical Technician
- Nurse
- Nurse Practitioner
- Paramedic
- Physician Assistant
- Therapist (Physical, Occupational, Speech/Auditory)

** Programs leading to MD or PhD Degrees are not eligible. Other programs that are not eligible include Pharmacists, Biomedical Research Technicians, and Psychologists/Social Workers.*

***Applicants in non-listed medical/health sciences fields must obtain the Foundation's approval before applying for this scholarship.*

Academic programs shall be a minimum of one (1) year and a maximum of six (6) years in duration with a maximum of two (2) years of payments.

Award

Qualified applicants from the five (5) eligible high schools shall compete for one (1) scholarship of \$7,000. Payment will be made for the recipient's benefit in two (2) equal installments of \$3,500,

paid directly to the institution providing the medical/health sciences program. The initial scholarship payment will be issued once the Foundation receives a copy of the recipient's tuition bill. For the subsequent scholarship payment in the following academic year, proof of continued enrollment and verification of a 3.0 GPA (official transcript) are required.

A minimum of three (3) qualified applicants will ensure the award's granting. If there are fewer than three (3) qualified applicants, the award will be granted at the judges' discretion.

If the applicant pool exceeds ten (10) qualified applicants, the Trustees will identify finalists at their discretion. The finalists will be selected based on their cumulative academic performance, demonstration of extracurricular effort in a medical/health science field, and their essay. Qualified applicants from the five (5) eligible high schools will compete for (1) award.

Eligibility

- Applicants must be accepted and subsequently enrolled at a four-year, fully accredited college or university majoring in medical/health sciences. Applicants must be seniors who are full-time students at Joel Barlow, Masuk, Newtown, Shelton, or Trumbull High Schools. Applicants must remain full-time students for the entire academic year.
- Applicants must be U.S. citizens, nationals, or permanent residents. The award recipient must attend an undergraduate degree program in the United States.

- Applicants must have a minimum GPA of 3.0 out of 4.0 during the first three (3) cumulative years of high school and a minimum SAT score of 1160 or an ACT score of 22.
- Applicants must not be related to a Weller Foundation Trustee.
- The applicant's sole responsibility (and not the Weller Foundation and/or its judges) is to ensure that the college program requirements for the medical major are adhered to and that the college program qualifies for this scholarship.
- It is the applicant's responsibility to adhere to this scholarship program's rules.

Requirements

- **Please complete the application form, submit a resume (including a list of hours worked within the field of study), and include all other required attachments by the application deadline, February 26, 2025.**
- **An essay, 500 to 700 words in length,** written by the applicant, must be submitted with the application. The essay must be typed, and the word count must be recorded at the end of the essay. Essays that are not within the specified range of words may be disqualified. The essay shall be entitled "Why I Have Chosen A Career In Medicine (Medical/Health Sciences)."
- An official copy of the student's transcript or official documentation must be attached to the application. The transcript or official documentation must indicate the student's GPA and SAT and/or ACT scores.

Applications

Students should submit their application to their school representative/Weller Liaison for approval

and signature. **The Foundation must receive applications by February 26, 2025.**

- Those who have submitted acceptable applications must attend a brief interview with the judges on **Tuesday, March 18, 2025.**

Judging

- A committee of the Foundation's Trustees will rule on eligibility and judge the award recipients. The committee's selection of the award recipient shall be final.
- The award recipient will be chosen based on the applicant's ability to demonstrate a commitment to the medical/health field as a career and their potential success as a medical/healthcare provider. The following will assist the judges in choosing an award recipient:
 - Volunteer or compensated work at medical facilities. All work must be verified with an attached letter from an official at the organization noting hours worked.
 - Academic record in the science disciplines (Biology, Chemistry, General Physics, and Mathematics),
 - Extracurricular activities,
 - Substance and quality of the submitted essay,
 - Applicant's interview with the judges.
- **The award recipient will be notified by telephone on March 18, 2025.**
- Financial need is not a factor in determining the award recipient.

The Trustees reserve the right to exercise their discretion on all matters.

2025 APPLICATION FORM

Louis J. Lacroce Medical/ Health Sciences Scholarship

The Weller Foundation, Incorporated

Submission deadline: February 26, 2025

Complete the application using this fillable pdf form. Save and print your completed application to submit to your school representative.

(Please TYPE or PRINT all data in black ink.)

Applicant's Full Name: _____

Parent/Guardian Name: _____

Parent/Guardian (2) Name: _____

Complete Address: _____

Home Telephone: _____ High School: _____

Cell Phone Number: _____ E-Mail: _____

Class of _____

Intended Career: _____

Program Length for Certification/Degree: _____

Institution's Name: _____

Address: _____

Telephone: _____

Program Selected: _____

Education Expenses

| School year: | <u>YEAR 1</u> | <u>YEAR 2</u> | <u>YEAR 3</u> | <u>YEAR 4</u> |
|---------------------------|-----------------|-----------------|-----------------|-----------------|
| Tuition: | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Other (please add below): | | | | |
| _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Total: | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

Additional Details

Do you have special medical certifications (e.g., EMT, CPR, First Aid)? Please list them below and attach a copy of the certification documentation.

Have you participated in any medical-related job shadowing activity? Please specify below and attach documentation.

List extracurricular activities (Where, When, Offices/Positions Held). Please attach a resume. For jobs or volunteer work, indicate hours/days worked. Attach letters from organizations verifying involvement.

References: If you wish to include written references, attach them to this application and identify the attachments below.

Signed State of Eligibility:

I have read the program's criteria and have met the eligibility requirements. I confirm that the above and attached information is true and that I am not related to a Trustee of The Weller Foundation, Incorporated.

Student Signature

Date

RECEIVED BY SCHOOL REP: _____

DATE RECEIVED: _____

Attachment Checklist:

- ____ 500-700 Word Essay (*must include the word count at the end of the essay*)
- ____ Official Transcript with GPA indicated
- ____ Official documentation indicating SAT and/or ACT scores
- ____ Copy of Resume
- ____ Verification of any Work Experience/Job Shadowing (attach a signed letter from the organization)
- ____ Medical Certifications (if any)