



## **AMR NW Diversity Recruitment Scholarship Program 2024 Application**

**Application Deadline: 11:59PM, Tuesday, January 30, 2024**

*Please note: if mailing an application it must be **postmarked** by the deadline.*

### **Description:**

American Medical Response (AMR) Northwest wants to increase the diversity of our organization by increasing the number of racial and ethnic minorities in our workforce. Therefore, we have developed a program to support community members of color in their pursuit of a career in Emergency Medical Services (EMS). AMR's Diversity Recruitment Scholarship will provide *two financial scholarships that will cover full tuition, course fees and textbooks* to become a licensed Oregon EMT, Paramedic, and complete an Associate of Applied Science Degree (AAS) in Paramedicine.

To qualify, applicants must identify as a racial or ethnic minority and/or a Person of Color.

Note: this scholarship opportunity is *not* open to AMR employees or immediate relatives (parents, siblings, or children) of AMR employees. Applicants must be citizens or Legal Residents of the United States, or have work authorization in the US.

**The Diversity Recruitment Scholarship Program offers the following support to recipients that maintain successful student status:**

- College tuition, textbooks and course fees required to complete all paramedic pre-requisite courses, including general education courses, EMS courses, and Emergency Medical Technician (EMT) certification courses, at an approved institution.
- Tuition, textbooks and course fees required to complete Paramedic coursework at the College of Emergency Services (CES), located in Clackamas Oregon, resulting in an AAS degree.

Award recipients will be responsible for maintaining satisfactory educational performance throughout the duration of the scholarship period and will be required to commit to a minimum period of employment at AMR Northwest as a Paramedic or risk award forfeiture. Full details of the award agreement will be discussed with the award recipients' in the Service Agreement document. Highlights include:

- Recipients will have 36 months to complete both EMT and Paramedic programs from the time of award date.
- Upon graduation and licensure as an Oregon Paramedic, recipients agree to a work requirement with AMR NW for the next 36 months.
- Recipients must maintain a 2.5 grade point average and report the successful completion of all coursework to AMR NW quarterly in the form of transcripts.
- Recipients will be required to submit a driving record and must adhere to AMR's Driver Qualification Standards throughout their scholarship term and employment with AMR. Applicants with *more than two moving violations or at-fault collisions* combined are not eligible.
- Background checks are required for local EMT and paramedic programs, state licensing, and for employment with AMR. Please contact programs and organizations directly for specific policies.

### **Selection Process:**



The Diversity Recruitment Scholarship selection committee will evaluate scholarship recipients based on several criteria, including but not limited to:

- Candidates who identify as a racial or ethnic minority/Person of Color
- Preference for applicants who demonstrate financial need- not required to apply
- Preference for bilingual applicants – Not required to apply
- Demonstrated interest in Emergency Medical Services
- Successful past academic performance

**Completed applications are due on January 30, 2024.**

ATTN: Community Education Department  
One SE 2nd Avenue  
Portland, OR 97214

- Applications will be reviewed by the selection committee
- Finalists will be invited to interview with a panel of selection committee members including AMR leadership as well as local community members.
- Award decisions will be announced in March or April of 2024

Contact Jessica Sellers by email at [jessica.sellers@gmr.net](mailto:jessica.sellers@gmr.net); or phone 971-263-5784 with any questions regarding the scholarship.



**Directions:** Please complete all sections of the application. *Incomplete applications will not be considered.* To submit electronically, completed applications must be emailed to [Jessica.sellers@gmr.net](mailto:Jessica.sellers@gmr.net) by the application deadline. If sent by mail, or dropping off in person, completed applications must be received by end of business day on the application deadline, addressed as follows:

AMR NW  
ATTN: Community Education Department  
One SE 2<sup>nd</sup> Avenue  
Portland OR, 97214

Please contact Jessica Sellers by email at [jessica.sellers@gmr.net](mailto:jessica.sellers@gmr.net) or phone at (971) 263-5784 with any questions regarding the scholarship.

FIRST NAME			MIDDLE INITIAL			LAST NAME		
BIRTH DATE			STREET ADDRESS					
CITY			STATE		ZIPCODE			
EMAIL ADDRESS					TELEPHONE			
HIGH SCHOOL					DATES			
COLLEGE (IF APPLICABLE)					DATES			

Are you a current AMR employee? ☐ YES ☐ NO

Are any of your immediate relatives (parents, siblings, children) AMR employees? ☐ YES ☐ NO

Are you a U.S Citizen, Legal Resident, or have work authorization in the US? ☐ YES ☐ NO

How did you hear about this scholarship opportunity? (i.e. word of mouth, school counselor or teacher, online etc.).



**Race/Ethnicity – Please check any/all that apply**

- |  |   |
|--|---|
| <input type="checkbox"/> Asian                             | <input type="checkbox"/> Middle Eastern   |
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Black/African American            | <input type="checkbox"/> White            |
| <input type="checkbox"/> Hispanic / Latino/a/x             | <input type="checkbox"/> Other _____      |

**Language – Please check any/all languages that you are fluent in**

- |                                  |                                      |
|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Russian     |
| <input type="checkbox"/> English | <input type="checkbox"/> Spanish     |
| <input type="checkbox"/> French  | <input type="checkbox"/> Vietnamese  |
| <input type="checkbox"/> German  | <input type="checkbox"/> Other _____ |

**Essays – Please attach to completed application**

**Please provide answers to the following questions in two separate essays:**

1. Please describe why you think diversity, equity, and inclusion are important in improving patient care and how you can contribute to this effort. (Maximum 1000 words).
2. What specific traits and characteristics are needed to be a great Emergency Medical Services (EMS) professional? Please describe how you demonstrate these traits. (Maximum 1000 words).

**Recommendations – Please attach to completed application**

All applicants should provide 2 letters of recommendation-no more than 1 page in length each. Recommenders should provide, at minimum, the following information:

- Recommender's name and Applicant's name;
- Recommender's contact information including phone number and e-mail;
- Length of time acquainted with and relation to Applicant;
- Information regarding academic capabilities, motivation, personal character, experiences and/or achievements of Applicant and why Applicant is a good candidate for this scholarship opportunity.

Recommenders should not be related to Applicants. Examples of appropriate recommenders include teachers, counselors, advisors, employers, coaches, religious leaders, and mentors.



**Please answer the following questions about financial need. Scholarship recipients may be asked to provide verification of submitted information.**

Adjusted Gross Income and federal income tax amounts should reflect the household's most recent US tax return. If the Applicant is claimed as a "dependent", the parent/guardian should provide the following information. If the Applicant is not claimed as a "dependent", please enter the Applicant's financial information below.

Are you claimed as a "dependent" on the household's most recent US tax return? YES ☐ NO ☐

Adjusted Gross Income (Form 1040): \_\_\_\_\_

Total US Federal Income Tax Paid (Form 1040): \_\_\_\_\_

State of Residence: \_\_\_\_\_

Total number of family members living in the household and primarily supported by the above income: \_\_\_\_\_

Total number of family members attending college at least half-time during the next school year, including the Applicant: \_\_\_\_\_

Do you expect to be claimed as a "dependent" next year? YES ☐ NO ☐



## Diversity Recruitment Scholarship

### Application Checklist

- ☐ High School graduate/GED, or anticipated graduation date of June this year
  - ☐ Completed and signed scholarship application form
  - ☐ Completed and attached all required essay questions
  - ☐ High School transcript **or** most recent transcripts from college(s) are attached
- Note: If you have completed less than five 100-level or greater college courses, please attach high school transcripts*
- ☐ Two letters of recommendation are attached
  - ☐ 3 year DMV driving abstract

If selected for this scholarship, I authorize release of information for publicity purposes.

X

Applicant's Signature

X

Guardian's Signature if Applicant is under 18

I understand that if selected for this scholarship, I will be expected to apply to one of the approved institutions (if not currently a licensed EMT), and subsequently CES's Paramedic Program in Clackamas Oregon within three years of the scholarship award date. I further acknowledge that upon completion of the Paramedic certification, I agree to work for AMR NW for 36 months.

X

Applicant's Signature

X

Guardian's Signature if Applicant is under 18