



INDIANA HEALTH CARE
POLICY INSTITUTE



**Indiana Health Care Policy Institute, Success Development, inc., & Martin University
Residential Care Administrators/Health Facility Administrators Education Scholarship Application**

ELIGIBILITY:

To be considered for an Indiana Health Care Policy Institute, Success Development, inc. & Martin University RCA/HFA Education Scholarship, the applicant must:

- Reside in the State of Indiana
- Possess a Bachelor degree or higher
- Agree to attend Residential Care Administrators/Health Facility Administrators Course provided by Success Development, inc. and Martin University at Martin University in Indianapolis, Indiana September 19, 2011 – October 28, 2011.
- Have an employment history that reflects management or leadership skills
- Have worked in the long term care profession for 2 year or less or new to the profession
- Must provide proof of an **(individual)** income at or below \$40,000 (e.g. W-2, Employment Letter, Unemployment Compensation Letter)
- Have a passion to work with the elderly or disabled populations
- Return completed application with college transcripts, financial need verification, three letters of recommendation, and an essay to IHCPi by the **April 1, 2011** deadline
- Agree to a personal interview in Indianapolis when contacted by IHCPi
- IHCPi will assist with identifying potential Administrators-in-Training (AIT)

Individuals related to a member of the IHCPi Board of Directors, Success Development, inc. and Martin University are ineligible.

IMPORTANT NOTICE:

IHCPi requires the following information to be submitted with completed application postmarked by April 1, 2011. Failure to provide all requested information will result in disqualification.

- ✓ Three Letters of Recommendation - one of which must be from an Employer
- ✓ Letter or official document indicating verification of financial need or unemployment benefit compensation
- ✓ Essay (as noted on the application form)
- ✓ A clear photocopy of your college transcripts

Completed application and all required materials must be mailed to the following address:

Indiana Health Care Policy Institute
Dorothy Henry, Executive Director
One N. Capitol Avenue, Suite 100
Indianapolis, IN 46204
317-616-9028
www.ihca.org



INDIANA HEALTH CARE
POLICY INSTITUTE



.....
Complete Employment History (additional pages accepted)

Current Employer: _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

Phone: ____ / ____ / ____ Fax: ____ / ____ / ____

Present Position: Date Started: _____ / _____ / ____

Immediate Supervisor: _____

.....
Previous Employer: _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

Phone: ____ / ____ / ____ Date Started: ____ / ____ / ____ Date Ended: ____ / ____ / ____

Position or Job Held: _____

Immediate Supervisor: _____

Previous Employer: _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

Phone: ____ / ____ / ____ Date Started: ____ / ____ / ____ Date Ended: ____ / ____ / ____

Position or Job Held: _____

Immediate Supervisor:

.....
Essay Questions

On a separate page, please write an essay that covers each of the following points. Your essay should be typed. Please limit your response to 1000 words.

- Describe your management and/or leadership experience
- Describe your interest in working with the chronically ill and long-term care administration
- Describe your expectations and vision as an administration working in a long-term care facility.

Finalists will be asked to come to Indianapolis in April to take part in a personal 30-minute interview.

.....
References: (please list the three references whose letters of recommendation are attached)

Employment:

NAME: _____

FACILITY: _____



Reference 2:

NAME: _____

TITLE: _____

RELATIONSHIP TO CANDIDATE: _____

Reference 3:

NAME: _____

TITLE: _____

RELATIONSHIP TO CANDIDATE: _____

Please ask references to submit to you a letter of reference to be attached to your application. The letter should be on the individual's company letterhead if appropriate and should describe why you would be a worthy recipient of an IHCP, Success Development, inc., and Martin University scholarship, addressing such areas as level of maturity, sensitivity to people's needs, a known commitment to the elderly or to long-term care, the ability to communicate and leadership abilities.

This reference page, along with the letters of recommendation, should be submitted with your completed application. Letters of recommendation sent without applications will not be considered.

