



## Minnesota HIMSS Scholarship

The Minnesota Chapter of HIMSS (Healthcare Information and Management Systems Society) annually awards a \$1000 scholarship to students studying in the healthcare information or management systems field.

Our goal: to reward future information technology or healthcare professionals investing their careers in the development of innovative system design, evaluation or implementation to improve the healthcare delivery system.

Scholarships are awarded for academic excellence and the potential for future leadership in the healthcare information and management systems industry. Review criteria include as a core foundation: scholastic achievement and demonstration of leadership potential, including communication skills and participation in HIMSS activities.

The \$1000 scholarship is awarded to the student deemed most deserving as determined by the Minnesota Chapter of HIMSS board.

### **Candidates:**

- Undergraduates, graduates and PhD students pursuing a career and coursework in healthcare and information management systems

### **Qualifications:**

- The applicant must be a member in good standing of HIMSS. (An application for membership may accompany the scholarship application. No dues are required with submission as the Minnesota Chapter will provide a complimentary one-year local student membership in the Minnesota Chapter once the scholarship application is complete.)
- A full or part-time student in an accredited undergraduate, Masters or PhD program related to the healthcare information or management systems field. The specific degree program is not a critical factor, although it is expected that programs similar to those in industrial engineering, operations research, healthcare informatics, computer science and information systems, mathematics, and quantitative programs in business administration and hospital administration will predominate.
- The candidates must either be Minnesota residents or enrolled in a Minnesota higher education institution.
- Previous Minnesota Chapter scholarship winners are ineligible.
- Participating students must declare any affiliation, outside support or conflict of interest in completing the contest.

### **Deadlines:**

Completed applications must be postmarked no later than April 1, 2009. Winners will be notified no later than May 1, 2009.



## Application for Minnesota HIMSS Scholarship

### Application Checklist

- Complete application
- Official transcript(s)
- Personal Statement
- Essay
- Resume or Curriculum Vitae
- HIMSS Membership Application (no dues required. The chapter will pay for your student memberships)

### Personal Data

Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Mailing/School Address (if different from above) \_\_\_\_\_

### Current Educational Enrollment

- Undergraduate
- Master's
- PhD Program

Name \_\_\_\_\_

Academic Advisor \_\_\_\_\_ Department \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

School \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Course Work

Please identify targeted core courses for your upcoming academic year.

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**Official Transcripts and Academic Achievement**

An official transcript from each educational institution that you have attended must be provided. These transcripts are required regardless of your length of stay at the institution. Complete the following information.

Institution \_\_\_\_\_ Degree Program \_\_\_\_\_

Dates of Attendance \_\_\_\_\_ Overall GPA \_\_\_\_\_ Major \_\_\_\_\_

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Dates of Attendance \_\_\_\_\_ Overall GPA \_\_\_\_\_ Major \_\_\_\_\_

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Dates of Attendance \_\_\_\_\_ Overall GPA \_\_\_\_\_ Major \_\_\_\_\_

**Professional Achievement and Academic Society Activity**

Please list any professional or academic societies or associations to which you belong.

- Indicate whether the society or association is concerned with healthcare information and management systems.
- If you currently hold, or have held, an office in any of the societies you list below, please indicate your position and dates of service. (Attach an additional page if needed.)

Society or Association \_\_\_\_\_ Is the purpose related to healthcare?  Yes  No

Office held \_\_\_\_\_ Dates of Service \_\_\_\_\_

Society or Association \_\_\_\_\_ Is the purpose related to healthcare?  Yes  No

Office held \_\_\_\_\_ Dates of Service \_\_\_\_\_

Please list any conferences, seminars, or symposia you have attended whose subject was pertinent to healthcare information and management systems. (Attach an additional page if needed.)

Program Title \_\_\_\_\_

Sponsor \_\_\_\_\_

Were you a presenter?  Yes  No Topic \_\_\_\_\_

Program Title \_\_\_\_\_

Sponsor \_\_\_\_\_

Were you a presenter?  Yes  No Topic \_\_\_\_\_

**HIMSS Involvement**

When did you become a member of HIMSS? \_\_\_\_\_ (Month/Year) or  Application Enclosed

Which HIMSS Chapter are you a member of? \_\_\_\_\_

Please list any other involvement you have had with HIMSS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Personal Statement**

Prepare a personal statement that includes a brief discussion of the following:

- Career Goals (goals upon graduation and short-term goals within the industry)
- Past Achievements (achievements that will support your future career goals)
- Future Goals (describe where you envision yourself in your career long-term and discuss the question “why should I receive the Scholarship?”)

### **Resume or Curriculum Vitae**

Attach a copy of your most current resume or CV. Provide complete work history including average hours worked, a list of all publications and presentations, and all academic awards.

### **Essay**

Submit a 1-2 page, double-spaced essay on the following topic: *The Purpose and Role of Healthcare Information and Management Systems in the Healthcare Industry.*

### **Personal Statement**

I certify that all of the above information is correct to the best of my knowledge. Applicant may be disqualified if false information is submitted. I understand that all material submitted becomes property of HIMSS and will not be returned.

Respectfully submitted by:

Signature \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### **Contact Information**

Completed applicants must be postmarked no later than April 1, 2009. Winners will be notified no later than May 1, 2009. Please send completed application to:

Scholarship Chair  
Minnesota Chapter of HIMSS  
P. O. Box 2331  
Minneapolis, MN 55402-0331