

2025 Intermountain Healing Hearts Scholarship Immediate Family Member of CHD Patient

Our Mission:

Intermountain Healing Hearts is a non-profit 501(c)(3) organization that supports families of children and adults with congenital heart defects (CHD's) and childhood onset heart disease. Most of the members we serve live in the Intermountain West and are seen through cardiology clinic at Primary Children's Hospital in Salt Lake City, Utah. IHH offers resources for families, community awareness events, funding for CHD research, and a caring support network as families navigate their heart journey to find answers, healing hope and peace.

Scholarship Objective:

Support CHD warriors and family members on their educational journey by providing financial assistance in the form of scholarships thus reducing some of the burdens they have already incurred on their challenging journey with CHD. This scholarship awards \$1,000.00 to the recipient and funds will paid directly to the college of their choice.

To Qualify for the Scholarship:

- 1. Applicant must be a parent/guardian or sibling of a patient with a congenital heart defect.
- 2. Applicant's family must be registered members of Intermountain Healing Hearts.
- 3. Applicant must live in the Intermountain West region.
- 4. Applicant must be a high school graduate by June 2025 and be seeking higher education at a college, university or trade school. Applicant can also currently be attending college, university or a trade school.
- 5. Awards may be deferred due to extenuating circumstances such as but not limited to illness, military service, or mission service etc.
- 6. Applicant must be working toward a degree in a healthcare related field.

To apply for the Intermountain Healing Hearts Scholarship, please submit all of the following in ONE email:

- 1. Completed Application Form.
- 2. Unofficial high school or college transcript
- 3. A one page letter from cardiologist or primary care physician documenting CHD diagnosis of immediate family member.
- 4. Recommendation Letter (letter should be from a teacher, counselor, adult mentor, etc. and include name, email and phone number)
- 5. Your Photo
- 6. Completed essays (send as one combined pdf for the essays)

Applications are due by **April 30, 2025** and are required to be submitted electronically to Scholarship@ihhearts.org. Please gather all documentation and submit all together in ONE email (including medical letter from the physician). The scholarship will be reviewed and awarded by an outside scholarship committee. The award will be distributed to the school before August 15, 2025 upon final verification of school attending beginning Fall Semester 2025. Scholarship submission will remain confidential and receive a scholarship identification number. Applicant's identity will remain anonymous to the scholarship review committee.



IHH Scholarship Application - Immediate Family Member

Date:		
Name:		
Address:		
City:	State:	Zip:
Phone Number:	Email Address:	
Date of Birth:		
Name of CHD Patient:		
Relationship to CHD patient:	Diagnosis of CHD Patient:	
Name of medical provider providing verific	ation letter:	
Is your family registered members of IHH?	□ Yes □ No (If No - pleas	se register before submitting application)
High School or College Presently Attending	:	
Year of High School Graduation:		
Grade Point Average (GPA) of school curre	ntly attending (on a 4.0 scal	e):
Year of College beginning Fall 2025: □ Fres	hman □ Sophomore □ Junio	r □ Senior □ Graduate School
Name of College, University, or Trade School	ol hoping to attend in Fall 20	025:
Planned Degree or Certificate in College:		
Extracurricular Activities/Memberships/Co	mmunity Service:	
Do you authorize IHH to use your informat	ion for CHD awareness and	or marketing?
□ Name Only □ Name and Photo □ Name	, Photo and Essay □ Name a	and Essay
On a separate page please write one essay	answering each of the follo	wing questions. The response for
each question should be 250 - 500 words.		

- Describe how having an immediate family member with a CHD has affected your decision to further your education in a health related field as well as life goals for the future.
- 2. What IHH events have you been to? Which has been your favorite and why?
- 3. Describe what you have learned by having an immediate family member with a CHD.