



Crawford Memorial Foundation Healthcare Scholarship – 2026

Awards: Scholarships

Eligibility: Residents of Crawford County pursuing a healthcare career

CMH employees are not eligible

Application Deadline: February 12, 2026

Submit to: Sheri Stodghill, Crawford Memorial Foundation

1000 North Allen Street, Robinson, IL 62454

Email: sheri.stodghill@crawfordmh.org

Notification Date: March 14, 2026

Scholarship funds are paid directly to the college/university.

SECTION 1 — PERSONAL & ACADEMIC INFORMATION

Full Name:

Phone:

Email:

Permanent Address:

County of Residence:

High School:

Graduation Year:

College Attending (or Accepted To):

Program/Major:

Degree Type: Associate Bachelor Other:

Current Year (if enrolled):

Do you currently work?

Employer:

Full-Time

Part-Time



SECTION 2 — ACTIVITIES & COMMUNITY INVOLVEMENT

Extracurricular Activities (List up to 6 – include years active)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Leadership Roles (List up to 4)

- 1.
- 2.
- 3.
- 4.

Awards or Honors (List up to 4)

- 1.
- 2.
- 3.
- 4.

Community Service (List up to 4)

- 1.
- 2.
- 3.
- 4.



SECTION 3 — REQUIRED ESSAYS

Typed responses required. 200 words or less each.

1. Describe a moment or experience that confirmed healthcare is the right career for you.

(Up to 200 words. You can type multiple lines; the box will scroll if needed.)

2. What do you believe will be the biggest challenge in healthcare over the next 10 years, and how do you hope to make a difference?

(Up to 200 words. You can type multiple lines; the box will scroll if needed.)

3. Tell us about a time when you helped someone who truly needed support — medically or otherwise. What did you learn?

(Up to 200 words. You can type multiple lines; the box will scroll if needed.)



SECTION 4 — REQUIRED ATTACHMENTS

Three (3) references completed and submitted with application.

*CM Foundation Reference Form is a separate and downloadable form from the Scholarship Application.

SECTION 5 — SIGNATURE

I certify that the information contained in this application is true and complete.

Signature:

Date: