



Bethesda Lutheran Church and School

The Lutheran Church-Missouri Synod

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website: <https://bethesdahssd.org>

Harlan and Mae Niedermyer Scholarship (\$1100.00 in 2020)

Harlan and Mae Niedermyer have been residents of Hot Springs for the past 50 years. They came to Hot Springs to finish up their careers in the healthcare field. Mae was a registered nurse for over 40 years and Harlan ran the X-Ray Department at the VA Medical Center until their retirements in 1979.

Harlan and Mae are currently both over the age of 100 and would like to establish scholarships to help Fall River area residents that are interested in pursuing a higher degree in the healthcare field.

The recipients for these scholarships will be chosen by a committee from Bethesda Lutheran Church where the Niedermyers were long-time members. This will be an ongoing scholarship and we encourage you to apply. Scholarship amounts may vary over time. If funds remain available, scholarships may be awarded on a semester basis.

To be Eligible the Following Criteria Must be Met:

- Must be working in the healthcare field currently and/or wish to pursue further studies in healthcare **or** must be a student accepted into a healthcare program of study.
- Must be a resident of Fall River County. There are no limitations on type of healthcare field or school that you plan to attend.
- Must submit an essay on why you want to receive or further your degree in health care.

Selection will be based on:

Essay-30% Financial Need-30% Volunteerism/Employment in healthcare field-25%
Activities promoting a Healthy Lifestyle-10% GPA-5% (if applicable)

Submit with the application:

- Copy of letter from school showing your registration into program of study
- Letter of recommendation from community member or supervisor
- Essay
- Transcript with GPA-if available
- Application

Send to: **Bethesda Lutheran Church**
1537 Baltimore Ave.
Hot Springs, SD 57747
Attn: Niedermyer Scholarship Committee

bethesda@gwtc.net

HARLAN AND MAE NIEDERMYER SCHOLARSHIP APPLICATION

- **Personal Information**

Name: _____

Date of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

- **School Information**

Name of School you are registered at: _____

Address of School: _____

Degree or healthcare field of training you are pursuing: _____
_____ Date studies begin _____

- **Current Employment**

Current Employment: _____

Past Employment: _____

- **Essay**

Please write a 500-1,000 word essay explaining why you are applying for this scholarship. Please include the following topics:

1. Achievements
2. Community involvement through volunteerism/employment in the healthcare field
3. Academic history, career goals & current health care related licenses
4. What are your financial needs in pursuing this degree?
5. What activities are you involved in to promote a healthy lifestyle?