Hutchinson Health Foundation 1095 Highway 15 S Hutchinson, MN 55350 320-484-4438 https://www.healthpartners.com/foundations/hutchinson



MCKAY FAMILY LEGACY SCHOLARSHIP

Background

The McKay Family Legacy Scholarship was established in 2018 in collaboration with Dan and Sarah McKay and the Hutchinson Health Foundation for the purpose of supporting community members choosing to pursue a career in emergency medical services (EMS), fire service, or law enforcement. Dan and Sarah McKay's desire to give back to the community they live in and serve, provides the impetus for the scholarship. The McKay family has a legacy in EMS and Fire Service in Hutchinson. The Hutchinson Health Foundation is proud to be a partner in making these grants available. One \$1,000 scholarship will be awarded through this program. Selection will be made annually by the McKay's, or their assigns, from complete and qualified applications, without regard to gender, race, creed, or national origin.

Qualifications

- 1. Eligible applicants must be accepted and plan to attend or are currently attending an approved training program:
 - EMT or Paramedic training program approved by the Minnesota Emergency Medical Services Regulatory Board (EMSRB)
 - Fire services program certified by the Minnesota Fire Service Certification Board (MFSCB)
 - Law enforcement program certified by the Minnesota Board of Peace Officer Standards and Training (POST)
- 2. Minimum cumulative high school (and postsecondary/college if applicable) GPA of 2.0.
- 3. The scholarship is open to both graduating seniors and community members.
- 4. Public safety family legacy is preferred, but not required.

Guidelines

- 1. Applicant must complete the included application.
- 2. Applicant must submit a transcript that includes 9th grade through present grades, including postsecondary/college if applicable.
- 3. Applicants must submit a 1-2 page typewritten essay explaining why they wish to pursue a public safety career. Comment on your desire to serve our community, long term professional goals including where you see yourself in 5-10 years, and how you handle adversity. What have you done to explore public safety careers? Do you have family, friends or mentors within public safety?
- 4. Minimum of one letter of recommendation is required. Recommendations from relatives are not permitted. Recommenders should provide at least the following information:

- Recommender's name and applicant's name
- Recommender's contact information including phone number, address, and e-mail
- Length of time acquainted with and relation to applicant

Recommenders may submit the letter of recommendation directly to the Hutchinson Health Foundation Office by noon on May 1st, 2026. Postal mail or email are acceptable.

Hutchinson Health Foundation Attention: McKay Family Legacy Scholarship 1095 Hwy 15 S Hutchinson, MN 55350

Contact Person:

Rachael Gemuenden, Hutchinson Health Foundation Director

Email: RGemuenden@hutchhealth.com

Scholarship Award

- \$1,000 one-time academic scholarship
- Scholarship awards will be based on merit and need.
- Selection committee will be composed of Dan & Sarah McKay, or their assigns. Scholarships will be awarded to students who are pursuing training and a career in public safety.
- The scholarship is available for one year after selection.
- Awards shall be made payable directly to the educational entity in the name of the scholarship recipient to be applied toward tuition expenses.
- For EMT students, this disbursement will be made upon scholarship award.
- For Paramedic, Fire Service, and Law Enforcement students, the disbursement of scholarship funds will be made upon successful completion of the first semester (Minimum GPA 2.0). To receive scholarship funds, please send a copy of your first term transcript to the Hutchinson Health Foundation office.
- Awards made to applicants currently attending qualified programs will only be eligible to receive an award for future tuition. The student must have applied or actively be enrolled for current or future classes at the time the scholarships are awarded and paid.

Application Instructions

Please complete the application form to apply for the McKay Family Legacy Scholarship. Please submit along with your transcript to the Hutchinson Health Foundation by noon on May 1st, 2026. Late applications will not be accepted.

| Applicant Information: | | | | | |
|---|-------------|-----------------------|---|-----|---------------|
| Applicant's First Name | | | Last Name | | Date of Birth |
| Home Address | | | | | |
| Current Address (if different | than above) | | | | |
| Applicant Phone Number | | | Applicant E-mail Address | | |
| High School and Graduation Year | | | | | |
| If applicable college, graduation year, and degree: | | | | | |
| Intended Training Program | : | | | | |
| ☐ EMT ☐ EM | T Paramedic | Fire | e Service | Law | Enforcement |
| Educational Facility: | | Program Phone Number: | | | |
| Education Facility Address: | | | | | |
| Date Started/Intended to Star | rt: | | | | |
| Length of Program: | | | | | |
| Cost of Program: | | | Are you receiving other financial aid? Yes No If yes, from where and how much? | | |

^{*}Costs should only reflect program costs, not books and materials.

| School Activities/Honors | Date: mo/year to mo/year |
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| Community Activities | Date: mo/year to mo/year |
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Work Experiences, list all prior employment for the past three years, including length of time employed

| Employer | Title | General Duties | Hours/week | Date: mo/yr - mo/yr |
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| Date: | Signature: |
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| Date. | Digitatare. |