



CENTRAL MESABI

Medical Foundation

2026 Dr. Benjamin P. Owens

HEALTHCARE CAREER SCHOLARSHIP FOR INCUMBENT WORKERS

The Dr. Benjamin P. Owens Healthcare Career Scholarship for Incumbent Workers is offered to individuals currently employed in a healthcare field who wish to advance their career through education and plan to remain in the central Iron Range area. The employee/student must be accepted and/or enrolled in an accredited health care program such as nursing, physician assistant, nurse practitioner, medical school, pharmacy, physical therapy, occupational therapy, etc. This scholarship is funded through the generous support of Dr. John Shenk through the Dr. Benjamin P. Owens Charitable Foundation and is administered by the Central Mesabi Medical Foundation (CMMF).

Scholarship Award:

The recipient(s) will be selected through an application process with decisions made by the Central Mesabi Medical Foundation's Scholarship Committee. Monies are awarded upon receipt of an enrollment schedule.

Eligibility Criteria:

Candidate must be pursuing an upgraded healthcare degree and meet the following criteria:

1. Applicants must be currently employed by their organization with at least 3 years of documented employment.
2. Applicants must be working to acquire education/skills allowing him or her to move into a higher position within their organization.
3. Applicants must be in good standing and include a letter of recommendation from their employer.
4. Applicants must intend to continue to serve their organization upon completion of their education.
5. Applicants must demonstrate a good academic record and progress in the career choice.
6. Applicants must be motivated and committed to service for others.
7. Dollar amount of award(s) will be considered on a case-by-case basis.
8. No retroactive scholarships will be given.

Application Process:

Applications must include the following information:

- Completed signed application page
- Attached answers to questions
- One letter of recommendation
- Proof of enrollment in accredited program
- Copy of transcript (if applicable)

Applications must be postmarked or received by May 15, 2026.

**Mail: Central Mesabi Medical Foundation at 750 E. 34th Street,
Hibbing, MN 55746 or Email: stephany.vesel@fairview.org**



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Name: _____ Phone: _____

Address: _____

City: _____ State & Zip: _____

Email address: _____

Current employment information/job title: _____

Number of years with current employer: _____

Major field of study: _____

GPA: _____

Institute you are or will be attending: _____

List other financial aid you are receiving for your education: _____

Applicant Signature: _____ **Date:** _____

Please respond to the following on a separate sheet:

1. Describe your career goals and aspirations.
2. What prompted your decision to advance your education/training/healthcare career?
3. How will advancing your education/training benefit your organization and/or the patients/communities you serve?
4. Upon completion of your education, what goals do you hope to accomplish in the next five years?
5. Describe your volunteer or community involvement.
6. Other activities/accomplishments/recognitions not mentioned in your application that you feel the scholarship committee should consider.
7. Financial need is not a requisite for the scholarship but will be taken under consideration. Describe need for the grant.