CENTRACARE Health Foundation

St. Cloud Medical Mission

The St. Cloud Medical Foundation Fund was set up through physicians practicing in St. Cloud to be used for projects coordinated by St. Cloud Physicians that have community benefit and/or to provide modest support for local individuals to perform medical mission work around the world.

An amount is allotted each fiscal year through the CentraCare Health Foundation Grants committee to use towards medical mission trips.

Criteria:

- Applicants should be residents of Stearns, Benton or Sherburne Counties
- Applicants may not have received the St. Cloud Medical Mission scholarship in the past calendar year (applicants qualify for funding every other year).
- Typed or printed applications should be sent to the CentraCare Health Foundation, 1406 6th Avenue N, Saint Cloud, MN 56303 by August 1st in order to be reviewed.
- Notice of acceptance will be sent by the end of October.

CENTRACARE Health Foundation

Medical Mission Application Deadline: August 1

| Date: | | | | |
|--|-------------|----------------------|-----|-----|
| Name: | | | | |
| Address: | | | | |
| Street | City | State | Zip | |
| County of Residence: | | | | |
| Home phone: | Cell phone: | | | |
| Email Address: | | | | |
| Present Occupation: | | | | |
| Current Employer: | | | | |
| Address: | | | | |
| Street | City | State | Zip | |
| Have you previously received a St. Cloud If so, when: | | on Scholarship: — | Yes | No |
| St. Cloud Physician leading your trip: | | Office #: | | |
| Team/Destination: | | | | |
| Why do you want to go on this trip? | | | | |
| | | | | |
| Is this trip through HELPS International? Please include contact person, phone nur | | | | th? |
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Please send completed form to:

CentraCare Health Foundation 1406 6th Avenue North St. Cloud, MN 56303 (320)240-2810