



TEXAS HEALTH INFORMATION MANAGEMENT ASSOCIATION

EVELYN L. COCKRELL MEMORIAL SCHOLARSHIP AWARD

Established in memory of Evelyn L. Cockrell
TxHIMA President in 1995-96

**Texas Health Information Management Association
Evelyn L. Cockrell Memorial Scholarship Award**

APPLICANT QUALIFICATIONS

- A. Status
 - 1. Must be enrolled in an AHIMA accredited educational program pursuing an HIT or HIA degree which leads to the RHIT or RHIA certification.
- B. Eligibility (must have all below):
 - 1. Must be a member of AHIMA (student or active)
 - 2. Must be a resident of the state of Texas for at least one year prior to application date.
 - 3. Must be a citizen of the United States or hold resident status in the U. S.
 - 4. Must complete an essay to addressing their financial need to continue education in health information management.
 - 5. Must submit current program transcript. If a first semester freshman, a high school transcript must be included.

JUDGING CRITERIA

- A. Essay (50 points)
 - 1. Content
 - 2. Writing style
 - 3. Grammar, spelling, punctuation
- B. 1. Financial Need (50 points)

STEPS TO BE TAKEN BY STUDENT TO COMPLETE APPLICATION PROCESS

- A. Each applicant must:
 - 1. Complete all information on the application form.
 - 2. Get a copy of his/her program transcript (official or unofficial) or a copy of his/her high school transcript if a first semester freshman.
 - 3. Ask two (2) persons to complete a letter of recommendation. One letter must be from an educational advisor or professor. One of the letters of recommendation must also address perceived financial need of the student and how receiving this scholarship will benefit the student to continue their health information education.
 - 4. Write an essay of 350-400 words about personal goals and how the scholarship money will help him/her to reach the goals. At the bottom of the essay, add the following disclaimer: "This essay is my work and has not been written, composed or edited for me by anyone." Sign and date the statement.
 - 5. Enclose one (1) current digital photograph which will be published with the winner's names at the discretion of the Board of Directors. The photograph will not be circulated to the Board of Directors until the recipient has been chosen.
 - 6. Sign and date each item on the agreement form.
- B. Submit items (1) through (8) to the TxHIMA Executive Office: 3331 Ranch Road 12, #104, San Marcos TX 78666. Applications must be postmarked by **March 1, 2010**.

SELECTION OF THE AWARD RECIPIENT

The above information will be submitted to the Board of Directors of the Texas Health Information Management Association. The TxHIMA Board will make the final decision for awarding the scholarship. The Board of Directors has the right to reject any and all applications for scholarships at their sole and absolute discretion. Award of the TxHIMA Evelyn L. Cockrell Memorial Scholarship Award will be made at the TxHIMA Annual Meeting.

RECOMMENDATION LETTER FROM EDUCATION ADVISOR OR PROFESSOR
for the
TxHIMA EVELYN L. COCKRELL MEMORIAL SCHOLARSHIP AWARD

_____, a student at _____
(name of applicant)

Program is applying for a scholarship for the next academic semester. Please write your evaluation of this student's work in your class or business setting, and his/her potential for outstanding achievement and leadership in the health information management or other health related profession.

Return the completed recommendation to the student, so it can be submitted with the rest of the application packet. The deadline for the completed application packet to be submitted (postmarked) to the TxHIMA Executive Office is **March 31, 2010**.

Name and Title or Relationship to Applicant

Date

RECOMMENDATION LETTER REGARDING FINANCIAL NEED
for the
TxHIMA EVELYN L. COCKRELL MEMORIAL SCHOLARSHIP AWARD

_____, a student at _____
(name of applicant)

Program is applying for a scholarship for the next academic semester. Please write your evaluation of the perceived financial need of this student and how receiving this scholarship will benefit the student to continue their health information education.

Return the completed recommendation to the student, so it can be submitted with the rest of the application packet. The deadline for the completed application packet to be submitted (postmarked) to the TxHIMA Executive Office is **March 1, 2010**.

Name and Title or Relationship to Applicant

Date

**Texas Health Information Management Association
Evelyn L. Cockrell Memorial Scholarship Award**

AGREEMENT

- I. I agree to use the Evelyn L. Cockrell Memorial Scholarship Award for study only in the health information management profession.

Applicant: _____

Date: _____

- II. I agree to submit a written report to the TxHIMA Board of Directors, within 9-12 months of receipt, about the use of the scholarship.

Applicant: _____

Date: _____

- III. I agree to attend the TxHIMA Annual Meeting, at a time to be chosen by the Board of Directors, to receive the scholarship.

Applicant: _____

Date: _____