

# Gary Haigh

## EMS Scholarship Application

The Gary Haigh EMS Scholarship was created in memory of Gary Haigh, an amazing individual who worked in several departments at Billings Clinic including the Emergency Department, Declare, and Regional Services. Gary was highly respected in his profession as an EMT, Paramedic, and EMS Trainer. He became an EMT in 1983 and emergency services quickly became his passion and way of life. He served the profession in many ways that touched communities across Montana. Unfortunately, Gary passed away in 1997 from injuries received in a motor vehicle accident while on his way to teach an EMT class.

Through many memorial contributions from EMS providers and friends, Gary's family created the Gary Haigh EMS Scholarship fund to carry forward Gary's commitment to rural health care.

The purpose of the scholarship is:

- To help an organization maintain or upgrade to a higher EMS System provider level, and/or,
- To help provide EMS continuing education for pre-hospital and/or emergency department personnel

**Application Date:**

**Rural Health Care Organization**

**Requesting Funds:**

**Address:**

**Contact Person:**

**Title/Position of Contact:**

**Email address:**

**Type of Request:**      Employee/Volunteer Training

Continuing Education Program

**Total Training Cost:**

**Amount Requested:**

**Date Funding Needed by:**

**Project Description:**

**Please submit the application package in one email to the following email address:**

[spratt@billingsclinic.org](mailto:spratt@billingsclinic.org)

In the email please attach:

- This application (saved with your information).
  - To save with your information: Download the PDF application to your computer. Fill out application. Save a copy to your computer. Attach saved copy with your information to the email.
- Any additional information or documents

Or

Mail complete application package to:

Billings Clinic Foundation

P.O. Box 31031 Billings, MT 59107

If you have questions, please e-mail: [spratt@billingsclinic.org](mailto:spratt@billingsclinic.org)

<b>for Billings Clinic Foundation office use only</b>					
Action by Scholarship Committee	<input type="checkbox"/>	Approved	Funding: \$	<input type="checkbox"/>	Not Approved
Date:					
Action by Foundation	<input type="checkbox"/>	Approved	Funding: \$	<input type="checkbox"/>	Not Approved
Date:					
President's Signature: _____				Date:	