WCF MUTUAL INSURANCE COMPANY

2025-2026 UNDERGRADUATE SCHOLARSHIP APPLICATION

WCF Mutual Insurance Company | 100 West Towne Ridge Parkway | Sandy, Utah 84070

The Program

WCF Insurance is the largest workers' compensation insurance carrier in Utah, insuring approximately 19,000 Utah employers and their employees. To further serve Utah employers and employees, WCF Insurance sponsors undergraduate education in occupational safety and health studies. This scholarship assists students seeking to complete the Minor in Occupational Safety & Health offered through the University of Utah's Department of Health, Kinesiology and Recreation. Students completing the minor may become graduate-level students studying occupational, safety, ergonomics, industrial hygiene, occupational injury prevention, and occupational medicine at the University of Utah's Rocky Mountain Center for Occupational and Environmental Health (RMCOEH). WCF Insurance will award individual scholarships valued at up to \$1,500 to be used for tuition, fees, and full-time academic expenses. The program is administered by WCF Insurance.

Requirements

To be eligible, an entering student must:

- 1. Be a current undergraduate student in good standing at the University of Utah or Weber State University.
- 2. Have an overall undergraduate GPA of 3.0 (on a 4.0 scale) or better.
- 3. Provide unofficial transcripts from Weber State/University of Utah and all colleges and universities attended (For academic questions related to the major in OEHS at Weber State <u>Justinthygerson1@weber.edu</u> or minor in OEHS at Utah Chris.Stafford@health.utah.edu
- 5. Provide a letter of recommendation from a faculty member (not necessary if you are already in the University of Utah's College of Health undergraduate program or Weber State's Bachelor of Interdisciplinary Studies with a focus in OEHS).
- 5. Complete the WCF Undergraduate Scholarship application form.

For students who have completed one class and have completed or are enrolled in a second class in the minor no letters of recommendation are required. All other requirements as listed above must be met.

How Scholarship recipients are chosen

Selection criteria include:

- Past academic performance;
- Professional, work, or personal experience;
- Financial need; and
- Potential to complete the program and contribute to worker health and safety.

Selections will be made by a panel chosen by WCF Insurance.

What obligations are associated with the program?

Students receiving this scholarship will be required to maintain at least a 3.0 GPA or better in their selected field of study.

How to apply

Interested individuals should complete a WCF Insurance Undergraduate Scholarship Application. The completed application, transcripts and letters of recommendation should be submitted to WCF Insurance. Mail or email completed application forms, transcripts and letters of recommendation *by Friday, April 18, 2025, at midnight* to Paula Summers at WCF Insurance, 385.351.8013.

By email: psummers@wcf.com

By mail: Attention: Paula Summers WCF Safety & Risk 100 Towne Ridge Parkway Sandy, UT 84070

The applicant is solely responsible to assure all materials are received at WCF Insurance's office by the deadline.

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INSTRUCTIONS

All blanks must be completed. If answer is "none" or "does not apply", so indicate. To be valid, this form must be signed. Completed applications as well as transcripts and letters of recommendation must be received in the office of WCF Insurance by *Friday, April 18, 2025, at midnight.*

Personal information						
Name (Last, First, Middle)						
Street address		City		State	Zip	
Date of birth		Citizenship	Citizenship			
Home phone number	Cell phone number	Email address	Email address			
Education		1				
College or University			Expected graduation date			
Undergraduate field of study		Area of emphasis	ea of emphasis			
Planned graduate program (if any)					
	ner scholarship(s), tuition sup ademic year? Include scholars					
 On a separate sheet of paper, state your short and long-term goals, especially as related to a potential career in occupational safety and health. Please specify how funding would help achieve your goals. 						
Date		Applicant's printed name				
		Applicant's signature				