

Southern and Northern NH AHEC Community Health Worker Course

June 4, 11, 18, 25, July 9, 16 and 30, 2018

Manchester Health Department, 1528 Elm Street, Manchester, NH

Scholarship Request Form

Name: _____

Address: _____ City, State, Zip code: _____

Language(s) spoken : _____

Please briefly explain why are you requesting a scholarship to attend the Community Health Worker (CHW) training (Describe your goals, financial need etc).

Please submit this form to Gina Savinelli at gsavinelli@snhahec.org or by mail at **Southern NH AHEC, 128 State Route 27, Raymond, NH 03077**. The educational team will review your request and get back to you shortly. There are a limited number of scholarships.

