

BUCKSMONT PHARMACISTS ASSOCIATION ANNUAL SCHOLARSHIP AWARD APPLICATION

CRITERIA:

APPLICANT MUST BE A RESIDENT OF BUCKS OR MONTGOMERY COUNTY AND ENROLLED FULL-TIME IN PHARMACY SCHOOL, AND BE A MEMBER OF PPA AND BMPA

APPLICANT MUST CURRENTLY BE IN THEIR FIRST PROFESSIONAL YEAR OF THE PHARM D PROGRAM OR BEYOND AND MAINTAINED A CUMULATIVE 3.0 GPA OR GREATER

PRIOR AWARDEES NOT ELIGIBLE

APPLICANT CANNOT BE A RELATIVE OF ANY BMPA BOARD MEMBER OR OFFICER

TO APPLY:

SUBMIT THIS APPLICATION AND INCLUDE THE FOLLOWING:

- AN ESSAY, 500 WORDS OR LESS, TO THE SCHOLARSHIP COMMITTEE OUTLINING THE CANDIDATES PERSONAL GOALS IN THE PROFESSION OF PHARMACY WITH AN EMPHASIS ON THE IMPACT PHARMACISTS HAVE ON IMPROVING AND MAINTAINING COMMUNITY HEALTH INITIATIVES

DEADLINE FOR SUBMITTING APPLICATION August 1, 2018
SCHOLARSHIP AWARD DATE PPA ANNUAL CONFERENCE 2018

AMOUNT OF SCHOLARSHIP \$500 (2 WILL BE AWARDED, WITH THE GOAL OF ONE FOR EACH COUNTY RESIDENT)

NAME (Print) _____

SIGNATURE _____

ADDRESS _____

TELEPHONE NUMBER _____

E-MAIL _____

ANTICIPATED YEAR OF GRADUATION _____

THIS STUDENT MEETS THE CRITERIA AS STATED

SIGNATURE (DEAN OR DESIGNEE)

(DATE)

MAIL COMPLETED APPLICATION AND ESSAY TO:

BMPA SCHOLARSHIP COMMITTEE C/O ROBERT FRANKIL
21 MINER CIRCLE
COLLEGEVILLE, PA 19426
Or email to bobbygolf@comcast.net

QUESTIONS ABOUT THE SCHOLARSHIP SHOULD BE EMAILED TO rstall@papharmacists.com