

Eligibility Criteria

Applicants:

1. must be an Arkansas resident.
2. must be enrolled, or have plans to enroll in a field of public health.
3. must be a high school senior or have a high school diploma or GED.
4. must have at least 2.5 GPA (based on a 4 point system).
5. must demonstrate financial need.

Judging Criteria

- | | |
|---|------------|
| 1. GPA | Max 4 pts. |
| 2. Goals in Public Health | Max 7 pts |
| 3. Honors, organizations,
volunteer with health related
organizations | Max 7 pts. |
| 4. Letter from major
professor or high school teacher | Max 3 pts. |
| 5. Personal reference letter | Max 3 pts. |
| 6. Present or past public health
experience | Max 3 pts. |
| 7. Financial need | Max 5 pts. |

Deadline: March 16 of each year

Notification: April 1 of each year

**Presentation: Annual APHA
Conference**

Arkansas Public Health Association

\$500

Annual Scholarship
for Arkansas Students
in a
Public Health Field



Application for APHA \$500 Annual Scholarship For Arkansas Residents in a Public Health Field

NAME _____

ADDRESS _____

TELEPHONE NUMBER(S) _____

High School, College, or University Presently Attending: _____

Major: _____

Classification (sophomore, junior, etc.) _____

Status: Full Time Part Time

Attendance at Other College, University, or Technical College:

Name of Institution: _____ Dates Attended _____

Name of Institution: _____ Dates Attended _____

List Honors, Organizations, Volunteer work with health-related organizations:

The foregoing statements are accurate to the best of my knowledge.

Signature _____ Date _____

Items to be attached to application:

1. Official high school, college, university, or Technical College transcript(s).
2. Letter of recommendation from major professor or high school teacher.
3. Letter of personal reference
4. Statement/explanation of financial need
5. Explanation in 150 words or less concerning your goals in public health, your reason for wanting the scholarship, your past or present public health experience.

Application Deadline: Application must be received by March 16 of each year.

Notification: Recipient will be notified by April 1 of each year.

Mail application and all attachments to: Scholarship Chair

Arkansas Public Health Association
P.O. Box 250327
Little Rock, AR 72225