GENERAL FEDERATION *of* WOMEN'S CLUBS MASSACHUSETTS

Terry Rouvalis, President

2027 PUBLIC HEALTH SCHOLARSHIP for GRADUATE STUDY

starting at $1000

ELIGIBILITY: Graduate applicant maintaining legal residence in Massachusetts.

REQUIREMENTS:

1. Completed Application Form and materials to be received no later than **March 1, 2027**.
2. Personal statement of not more than 500 words addressing your professional goals and how they relate to a public health program. Word count on statement must be provided.
3. Letter of reference from an academic advisor or college professor on school letterhead or from an employer.
4. Copy of Massachusetts Driver's License or Massachusetts Identification Card.
5. Official college transcript(s) with grades.
6. Confirmation of acceptance to a graduate level program, if received. (If selected as a recipient, copy of acceptance must be provided to GFWC MA Treasurer before scholarship award is issued.)

SUBMIT BY EMAIL: It is preferred that you send all required documents electronically as pdf or Word docs. Email all documents to GFWC MA HQ Secretary, Headquarters@gfwcma.org by March 1, 2027 and put the scholarship title you are applying for in the subject line.

SUBMIT BY MAIL: Send all materials in ONE envelope to GFWC MA Memorial Education Committee, P. O. Box 679, Sudbury, MA 01776-0679; **Attention: Graduate – Public Health Scholarship**

APPLICATION FORM - 2027 Public Health Scholarship (Graduate)

Name_____ Tel._____

Address:_____

City, Zip Code_____ E-mail_____

College(s) attended: _____

Degree received and graduation year: _____

Graduate school(s) to which you have applied:

_____ Accepted: Yes ❑

_____ Accepted: Yes ❑

Expected graduation date and major: _____

Signature:_____ Date:_____

Questions may be directed to GFWC MA Graduate Scholarship Chairman Lynne Stader: Lynne@stader.org

Failure to comply with the above requirements will result in disqualification.