

HOWARD G. LAPSLEY | MEMORIAL SCHOLARSHIP FUND

Muhlenberg Foundation | Park Avenue & Randolph Road, Plainfield, NJ 07061

APPLICATION

General Information for Applicants:

The Howard G Lapsley Memorial Scholarship Fund for Medical Education was established in 1979. Eligible candidates must have a personal interview to be considered for awards. Interviews will not be scheduled until the application is complete, including references and financial assessment.

Applications received after May 1 will not be considered.

(please type or print all responses)

1. Legal Name: _____
2. Current Mailing Address: _____
3. Telephone Number: _____
4. Permanent Mailing Address: _____
5. Permanent Telephone Number: _____
6. Email Address: _____
7. Date of Birth: _____ Birth Place: _____ Sex: _____
8. Citizenship: _____
9. Dependents: _____
10. Military Status: _____
11. Marital Status: _____
12. Educational Background:
 - Elementary School: _____
 - Address: _____
 - Dates of Attendance: _____
 - High School: _____
 - Address: _____
 - Dates of Attendance: _____
 - Pre-Medical College: _____ Degree: _____
 - Address: _____
 - Dates of Attendance: _____
 - _____
 - Medical College: _____ Years Completed: _____
 - Address: _____
 - Dates of Attendance: _____
 - Graduate Educational Experience (if any): _____
 - _____
 - _____
 - _____

(continued on next page)

13. Academic period for which the student seeks financial assistance: _____

Name of institution student plans to attend: _____

Address: _____

Dean's Name: _____

Degree student ultimately wishes to obtain with scholarship: _____

14. A transcript of grades is required. The student has the sole responsibility of forwarding transcripts, both undergraduate and graduate, to the JFK-Muhlenberg Campus Board of Directors.
15. The student must furnish four (4) letters of reference to the review committee, two of which are academic references. References are to be submitted directly to the committee.
16. Student must provide the committee with FASFA financial report.
17. Student must submit a typed 100 word essay on why he/she seeks the Howard G. Lapsley Memorial Scholarship and what career in medicine he/she is pursuing.

I hereby agree that any misstatements in, or omissions from, this application shall constitute cause for rejection of this application and forfeiture of the Howard G. Lapsley Memorial Scholarship.

Signature of Applicant: _____ Date: _____

Mail completed application and required documents to:

The Howard G. Lapsley Scholarship,
JFK-Muhlenberg Campus
Park Avenue & Randolph Road
Plainfield, NJ 07061

Attention: John G. Nolan, Jr.
Senior Vice President
Muhlenberg Foundation