

NCPA FOUNDATION SCHOLARSHIP APPLICATION



Type or print clearly. Incomplete applications will not be accepted.

WHICH NCPA FOUNDATION SCHOLARSHIPS ARE YOU APPLYING FOR (check mark ONLY one):

Note: Please be advised you are to apply for only one NCPA Foundation scholarship per school year.

- J.C. AND RHEBA COBB MEMORIAL SCHOLARSHIP FOR EXCELLENCE IN GOVERNMENT AFFAIRS
- NEIL PRUITT, SR. MEMORIAL SCHOLARSHIP FOR ENTREPRENEURISM
- WILLARD B. SIMMONS SR. MEMORIAL SCHOLARSHIP FOR PHARMACY MANAGEMENT
- PRESIDENTIAL SCHOLARSHIP

NAME OF STUDENT: _____

PRESENT ADDRESS: _____

E-MAIL _____ TELEPHONE NUMBER: () _____

PERMANENT ADDRESS: _____

_____ TELEPHONE NUMBER: () _____

NCPA STUDENT MEMBERSHIP NUMBER: _____ EXPIRATION: _____

HOW LONG HAVE YOU BEEN A MEMBER? _____

HAVE YOU RECEIVED ANY OTHER SCHOLARSHIPS? _____

(IF YES, PLEASE LIST ALL SCHOLARSHIPS ON A SEPARATE SHEET OF PAPER WITH AWARD YEAR INDICATED)

WHICH ACCREDITED U.S. SCHOOL/COLLEGE OF PHARMACY DO YOU ATTEND?

NAME: _____

EXPECTED DATE OF GRADUATION: _____ GPA: _____

DEAN'S NAME: _____

THIS FORM MUST BE COMPLETED AND ACCOMPANIED BY THE FOLLOWING:

- COPY OF THE MOST RECENT OFFICIAL ACADEMIC TRANSCRIPT
- LETTER FROM SCHOOL OFFICIAL
- LETTER FROM PHARMACY OWNER OR MANAGER (preferably an NCPA member)
- LETTER FROM STUDENT TO NCPA PRESIDENTIAL SCHOLARSHIP AWARDS COMMITTEE
- APPLICANT'S RÉSUMÉ or CV
- ADDITIONAL REQUIRED SUPPORTING DOCUMENTS

ALL MATERIALS MUST BE POSTMARKED BY: March 15, 2008

Mail your application to: NCPA Foundation/Scholarship Awards Committee
100 Daingerfield Rd., Alexandria, VA 22314