

# David A Stone, M.D. Memorial Scholarship

## STUDENT SCHOLARSHIP APPLICATION FORM

229 Athens Street • Hartwell, Georgia • 30643 • (706) 376-3957

- Print clearly the following information. Turn in completed application with all applicable signatures to the address above. If the form is incomplete, inaccurate, or not signed, it will not be considered.
- Attach 500-word essay on why you feel you deserve this scholarship.
- Attach Letter of Good Standing from your school's registrar.
- Submit a new application each year.

### Personal Information:

Applicant Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Student ID or Social Security Number: \_\_\_\_\_

### Academic Information:

Medical School: \_\_\_\_\_ GPA: \_\_\_\_\_  
Specialty of Interest: \_\_\_\_\_  
College: \_\_\_\_\_ GPA: \_\_\_\_\_  
Major: \_\_\_\_\_

### Nepotism Statement:

State law requires applicants to identify any relation to a current David A. Stone, M.D. Memorial Scholarship Board of Trustees member.

Are you related to any member of the David A. Stone, M.D. Memorial Scholarship Board of Trustees?

YES  NO

If yes, please identify Board member and relationship: \_\_\_\_\_

### Authorization Information:

I release to the David A. Stone, M.D. Memorial Scholarship Committee the right to access all my current \_\_\_\_\_ and ongoing personal and academic records and transcripts.

**I certify that the statements herein are true to the best of my knowledge and grant permission for the information contained herein to be shared with the scholarship selection committee.**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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### Specific Scholarship Criteria:

- \$2500 scholarship will be distributed once.
- \$2500 scholarship may not be awarded to an individual more than one time.
- Applicant must be a Medical Student.
- Applicant must be community service oriented.
- Applicant must be a resident of Hart, Franklin, Elbert or Stephens county in the state of Georgia.
- Applicant must submit a 500 word essay describing why they should be awarded this scholarship. Personal interest and work in the community should be included.
- Applicant must include a letter from the school's registrar stating they are a student in good standing.
- Application must be submitted between March 1<sup>st</sup> – April 30<sup>th</sup>.