Announcement

MAUREEN R. L. MUSSENDEN SCHOLARSHIP

To honor the memory of Maureen R.L. Mussenden and the professional and personal values she espoused, the Maureen R.L. Mussenden Scholarship has been established to help support the education of students pursuing a graduate degree in one of the five UB Health Sciences Schools listed below. The Scholarship will provide one-third of the in-state tuition the year they apply for up to four years to two scholars.

- School of Dental Medicine
- School of Medicine and Biomedical Sciences
- School of Nursing
- School of Pharmacy and Pharmaceutical Sciences
- School of Public Health and Health Professions

Eligibility

1. Applicants must be currently enrolled in or been accepted to a graduate program in one of the five UB health sciences schools as listed above. (Residents and Fellows are not eligible).

2. Applicants must be “first generation” students (defined as students whose parents did not receive a college degree) and priority will be given to women. The Foundation and the University may modify or disregard any selection criteria that are determined in whole or in part to be contrary to law or to then existing University policy.

Submit completed application with personal essay and letter of recommendation from a member of the faculty to the Office of the Vice President of Health Sciences, 155 Biomedical Education Building, South Campus, no later than September 30, 2013.
APPLICATION
MAUREEN R. L. MUSSENDEN SCHOLARSHIP

Applications are due no later than September 30, 2013
(See ANNOUNCEMENT for eligibility criteria)

Personal
Applicant Name: ____________________________
  (Last Name) (First Name) (Middle Initial)

Gender: _______ Social Security Number: _______ - _______ - _______ Date of Birth: _______

Are you a US Citizen? Y/N If not, please explain: ___________________________________________

Mailing Address: _____________________________________________________________
  (City) (State) (Zip)

Email Address: ____________________________ Phone Number: Work: (___) _____ Home: (___) _____

Name of school and graduate program enrolled in or accepted to:
__________________________________________________________Program or Major: (If applicable)

Part-time or Full-time Student: ________________ Expected graduation date: ________________

Undergraduate School Attended: ____________________________ Major: ____________________________

Year Graduated: ____________________________

Honors and Awards
List honors or academic awards you have received (e.g. scholarships, research, etc.):

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<tr>
<th>Award/Honor</th>
<th>Institution/Organization</th>
<th>Date</th>
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Explain you educational and career goals:

________________________________________________________

Employment History

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<tr>
<th>Position</th>
<th>Employer</th>
<th>Dates of Employment</th>
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2
If employed, is your employer contributing toward your graduate education?

Parents
Name: ________________________________

Address: ________________________________

Phone Number: __________________________ Email Address: ________________________________

Highest level of education obtained by mother: ________________________________

Highest level of education obtained by father: ________________________________

Essay
Please attach an essay (500 words) describing why you should be selected to receive the MAUREEN R. L. MUSSENDEN SCHOLARSHIP.

Letter of Recommendation
Letter of recommendation must also be sent directly, via email, from faculty member to the Office of the Vice President of Health Sciences.

I certify that all of the information contained in this application is true and accurate and in the event I am awarded the Scholarship, all funds will be used to further my education.

Print Name

________________________________________

Sign Name Date

Application Checklist
To be considered for the MAUREEN R. L. MUSSENDEN SCHOLARSHIP:
Submit completed application with personal essay and letter of recommendation from a member of the faculty to the Office of Vice President of Health Sciences, 155 Biomedical Education Building, South Campus, no later than September 30, 2013.

Please direct any questions to Deborah Kelsch at the Office of Vice President of Health Sciences (716) 829-2775 or email at dikelsch@buffalo.edu. Successful applicants will be notified in writing on or before November 15, 2013.