

JOSEPH R. CALDER, JR., MD SCHOLARSHIP FUND
Family and friends of Dr. Calder established
The Joseph R. Calder, Jr., MD Memorial Scholarship Fund

Application Guidelines

This award is given in memory of Joseph R. Calder, Jr., MD. Dr. Calder was a dedicated member of the medical profession in Williamsport, PA for over 30 years. He was a strong believer in the power and importance of education and personal development. Dr. Calder was a teacher, mentor and coach who strived to better the people around him; he encouraged his team members, colleagues and staff, to pursue additional training to better their careers. The recipients of this scholarship will demonstrate these same values. This award is intended to support the education of current and/or aspiring Lycoming County medical professionals who plan to dedicate their lives to helping others.

Purpose & Awards: Scholarship(s) will be awarded annually in honor of Dr. Joseph R. Calder, Jr. The recipient of this award must be accepted into a full-time or part-time medical related program, including medicine, nursing, pharmacy, allied health or any other specialty at an accredited institution of higher education. Request can be for the first year or for any succeeding year of higher education. Applicants should reside in Lycoming County.

Application Process: An application with these guidelines can be obtained from the Williamsport Lycoming Community Foundation.

- Submit a completed application form;
- Attach an essay not to exceed one page outlining why you are pursuing a career in the medical field and summarizing your ultimate career objectives;
- Provide proof of acceptance to an accredited two- or four-year college or university in the medical field;
- Provide a resume and a letter of reference or testimonial.

Application Deadline & Address: Applications and requested materials are to be returned to the Williamsport Lycoming Community Foundation no later than **May 15** to the Williamsport Lycoming Community Foundation, 330 Pine Street, Suite 401, Williamsport, PA 17701.

Scholarship Selection Process: The Dr. Joseph R. Calder, Jr. Scholarship Selection Committee will select scholarship recipients.

Complete criteria:

- The recipient of the Joseph R. Calder, Jr., MD Scholarship Fund will be an individual who has been accepted into a full-time or part-time medical related program at an accredited institution of higher education.
- Programs include medicine, nursing, pharmacy, allied health or any other related specialty.
- The recipient will be based on merit.

Scholarship Awards Disbursement: One (1) scholarship will be awarded annually. Scholarship award payments will be paid directly to the college or university where the recipient will be attending.

JOSEPH R. CALDER, JR., MD SCHOLARSHIP FUND APPLICATION

Complete the application providing as much detail as possible.

NAME CIRCLE ONE (MS. / MR.)

ADDRESS

CITY, STATE ZIP

HOME PHONE

CELL PHONE

E-MAIL

(IF APPLICABLE) HIGH SCHOOL

(IF APPLICABLE) GRADUATION DATE

SOCIAL SECURITY NUMBER

(IF 18 OR UNDER) PARENTS' HOME PHONE

PARENTS' CELL PHONE

PARENTS' E-MAIL

AREA OF STUDY

1. Name and address of college or university where accepted. Please provide proof of acceptance into a full-time or part-time program of study in the medical field at an accredited institution.

2. Attach an essay not to exceed one page outlining why you are pursuing a career in the medical field.

3. Attach a resume and include one letter of reference or testimonial. In the resume, include any job experience, volunteer experiences, and community or school involvement.

Signature(s) required

I hereby affirm that the information on this form is true and complete to the best of my knowledge. I am aware of the conditions under which the awards are made and promise to inform the Williamsport Lycoming Community Foundation of any change in circumstances.

I hereby authorize the Williamsport Lycoming Community Foundation to share this information with members of the Scholarship Committee.

APPLICANT'S SIGNATURE

DATE

(IF 18 OR UNDER) PARENT OR GUARDIAN'S SIGNATURE

DATE

Return to: The Williamsport Lycoming Community Foundation by **May 15**
330 Pine Street, Suite 401
Williamsport, PA 17701

Questions: Betty Gilmour, Program Officer, at the Williamsport Lycoming Community Foundation
Phone (570) 321-1500
E-mail bettyg@fcfpa.org