



**IUPUI**

RICHARD M. FAIRBANKS  
SCHOOL OF PUBLIC HEALTH

## **MD-MPH Scholarship Application for Current IUSM Students**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Year in Medical School: \_\_\_\_\_

Email Address: \_\_\_\_\_

County in which you were raised: \_\_\_\_\_ State in which you were raised: \_\_\_\_\_

Gender (optional): \_\_\_\_\_ Race (optional): \_\_\_\_\_

IUSM Campus: \_\_\_\_\_

Academic performance and student financial need will be considered when selecting scholarship recipients for the MD-MPH program.

By checking this box, I give permission to the IUSM Office of Student Financial Services to release to the MD-MPH Scholarship Selection Committee the amount of financial aid received in medical school.

Please submit the following two documents with this data sheet:

1. A resume or CV (include any public health research or community-based service activities)
2. Essay: In 250 words or less, explain how you will use the MPH degree to augment your education/professional development and future career goals.

Applications for the MD-MPH Scholarship should be submitted electronically to Dr. Carole Kacius at [kacius@iu.edu](mailto:kacius@iu.edu) by February 15. You will receive an email confirmation when your application has been received. If you do not receive an email confirmation, please contact Dr. Kacius directly at (317) 274-3847.