

**SCHOLARSHIP FUND OF TULSA COUNTY MEDICAL SOCIETY FOUNDATION
APPLICATION FOR EDUCATIONAL ASSISTANCE AWARD**

RETURN BY August 2, 2021
SCHOOL YEAR: 2021-2022

PREVIOUS SCHOLARSHIP RECIPIENTS ARE NOT ELIGIBLE TO APPLY

1. Name: _____ 2. Birthdate: _____

3. Tulsa Mailing Address: _____ City _____ State _____ Zip _____ Phone: _____

4. Other Address: _____ City _____ State _____ Zip _____ Phone: _____

5. E-Mail: _____ 6. Social Security # "Required": _____ 7. Gender: M () F ()

8. Name of Medical School You Attend: _____ OU Tulsa _____ OSU COM

9. In 2020-2021 I will be a: Sophomore () Junior () Senior ()

Are You On Academic Probation: Yes () No () By signing this application, I give my permission for the Scholarship Fund to verify my academic status.

Grade Point Averages: Freshman _____ Sophomore _____ Junior _____

10. Pre-Medical Education (Name of School): _____

Years Attended: _____ Grade Point Average: _____

11. Please list any volunteer service or community activities you have participated in the last 4 years, *i.e. community agencies, faith-based activities, etc.*

12. Please list any leadership roles you have held in the past 4 years, *i.e. undergraduate or medical school leadership roles, medical associations etc.*

13. Are you a student member of your local county medical society? Yes () No ()

14. If so, describe your role(s):

15. _____ Present Specialty(s) Interest ☐ Undecided.

16. **PLEASE ATTACH** a statement about yourself, your educational plans, your long-range career plans, your interest in medicine, and other information, which you think, will be of interest to the Board of Trustees in evaluating your application for an educational assistance award: Please limit comments to 750 words or less.

Signature of Applicant _____ Date: _____

By signing above, I acknowledge that educational assistance awards are cash grants and do not have to be repaid. However, the TCMS Scholarship Foundation Fund Board anticipates that all recipients will commit themselves and be honor-bound to make a tax-deductible contribution of the equivalent amount of any award to the Fund, when they have completed all postgraduate residency training. I acknowledge that I have received and read the rules and regulations applicable to the Foundation's scholarship program and agree to be bound by such rules and regulations.

Mail or email completed application to: **TULSA COUNTY MEDICAL SOCIETY**
5315 South Lewis Avenue
Tulsa, Oklahoma 74105-6539
tcms@tcmsok.org
Inquiries: (918) 743-6184

RULES & REGULATIONS

SCHOLARSHIP FUND OF TULSA COUNTY MEDICAL SOCIETY FOUNDATION

5315 South Lewis Avenue

Tulsa, Oklahoma 74105-6539

Read the following information carefully before completing the application for an Educational Assistance Award.

Tulsa County Medical Society was established in 1907 to promote the science and art of medicine, foster ethical practices among members and unite the medical profession in promoting public health. It is very important to the medical society to remain a strong advocate for physicians, healthcare and the public. The focus of the Scholarship Program is to encourage the participation of medical students in leadership activities in both the community and organized medicine in order to cultivate physician leaders of the future. Medical students who have demonstrated leadership skills and/or an interest and capacity to improve public health or promote humanitarian issues will be selected to receive a scholarship award from Tulsa County Medical Society Foundation. You will be asked on the Application for Educational Assistance Award to describe the work you have done specific to volunteerism and leadership.

1. To be eligible to apply for an Educational Assistance Award from the Scholarship Fund of Tulsa County Medical Society Foundation, the applicant must meet the following requirements. **Effective 2017-2018 previous scholarship recipients are not eligible to apply.**

- (a) Must be enrolled in OU College of Medicine at the Tulsa campus or OSU College of Osteopathic Medicine.
- (b) A medical student may apply for an award for their sophomore, junior or senior year.

2. Application must be made on the forms provided by the Scholarship Fund of Tulsa County Medical Society Foundation and be completed in its entirety.

3. The completed application must be filed in the offices of Tulsa County Medical Society, 5315 South Lewis Avenue, Tulsa, Oklahoma 74105, **no later than August 2, 2021.**

4. Each applicant will receive a list of recipients of Educational Assistance Awards. The awards should be announced during the month of September. However, the Board of Trustees reserves the right to postpone the announcement of recipients at its discretion.

5. Educational Assistance Awards will be paid by check provided that all required certifications of enrollment, attendance and scholastic standing have been received from the medical school. Payments should be made between October and December. Recipients will be advised when to expect payment.

6. The selection of recipients is made solely by the Board of Trustees of the Scholarship Fund of Tulsa County Medical Society Foundation. The Foundation will make all rules and regulations governing the selection of recipients, eligibility, method of payment, and administration of the scholarship program. It reserves the right to change these rules without notice. The Foundation will consider any tie vote as a no pass action; thus all actions of the Foundation must be approved by a majority of the members voting. If a family member of a Trustee applies for a scholarship, then such Trustee will recuse himself or herself from the determination of whether a scholarship should be granted to the family member.

7. The number of Educational Assistance Awards to be made, and the amount of each Award, shall be at the exclusive determination of the Board of Trustees of the Scholarship Fund of Tulsa County Medical Society Foundation.

8. Payment of the Award is made only after an appropriate official of the medical school has certified that the applicant is enrolled, attending classes, and not on academic probation. In the event the applicant does not enroll, or withdraws before payment of the Award is made, the Award is void and will not be paid. In the event the recipient dies before the date of payment of the Award, the

Award is void and withdrawn, and cannot be paid to the estate of the applicant. Award is null & void if the check is not cashed within 90 days of issue.

9. The Board of Trustees reserves the right to request an applicant to appear before it for a personal interview or to provide additional information.

10. The Scholarship Fund of Tulsa County Medical Society Foundation reserves the right to appropriately publicize the list of recipients of Educational Assistance Awards in newspapers and other public media.

11. By signing the application, the applicant acknowledges that these assistance awards are cash grants and do not have to be repaid. However, the TCMS Foundation Scholarship Fund Board encourages all recipients to participate in advancing organized medicine's efforts toward the service of our profession and to the benefit of our patient's health.

Inquiries: (918) 743-6184