Application Process

The attached application form must be completed and mailed to the address noted at the end of the form. The application deadline for the MPH, MS-Health Communication and MS-Pain, Research Education and Programs is **March 1st** and for the MS-Biomedical Sciences Program **July 1st**. Please note that the scholarship application process is managed by the Office of Public Health and Professional Degree Programs and not the Medical School’s Financial Aid Office.

There is a limited amount scholarship funds available for fulltime MPH, MS-Health Communication and MS-Pain Research, Education and Policy students and for the MS-Biomedical Sciences Program there are two half scholarships available. Therefore, it is very important that you follow the instructions carefully and meet the noted deadline. *Incomplete or late applications will not be considered.*

Application Requirements:

1. **Scholarship Application**: Complete attached scholarship application.

2. **Independent Status**: Students applying for scholarships as independents (receive no support from parents) are required to submit a letter stating that they are not receiving substantial support for graduate education or living expenses from their parents.

3. **Personal Statement of Need**: Students must write a one page statement of need describing educationally/financially disadvantages they have had to overcome in pursuit of an undergraduate and graduate education.

4. **Complete the Financial Aid Application Process**: In addition to the Scholarship application, students are required to complete the financial aid process. Students will be required to submit a Tufts Institutional Financial Aid Application, 2012-13 FAFSA, and a signed copy of their 2011 Federal Tax Return to the Office of Financial Aid by the noted deadline. The application materials and/or instructions can be found at: [http://www.tufts.edu/med/about/offices/finaid/apply/mastersphd.html](http://www.tufts.edu/med/about/offices/finaid/apply/mastersphd.html)
Public Health & MS-Biomedical Sciences Programs
School of Medicine

Scholarship Application

Name: _____________________________________________________________

Program: ___________________________ Concentration: ______________________________

Address: _______________________________________________________________________

Telephone: _____________________________________________________________________

Email: _________________________________________________________________________

Enrollment Date: ___________________________ Expected Date of Graduation: ____________

Status (circle one): Fulltime/Part-time

Are you a U.S. Citizen? ☐ Yes ☐ No Gender: ☐ Male ☐ Female

Ethnic Group: ☐ African American, not Hispanic
☐ Caucasian, not Hispanic
☐ Hispanic
☐ Asian-American
☐ Native Hawaiian/Other Pacific Islander
☐ Native American/Alaskan Native
☐ Other ____________________________

High School Attended: ____________________________________________ ☐ Public ☐ Private

City and State of High School: _______________________________________

If you attended a non-U.S. or private high school, did it have a significant amount of low income and/or minority students? ☐ Yes ☐ No

Did your high school have advance preparatory courses? ☐ Yes ☐ No

College Attended: _________________________________________________

City and State of College: _________________________________________

Highest level of education attained by parents:

Mother: ___________________________________________ Father: ____________________________

Financial Information:

Family Annual Income (including parents)___________________________
Number of members in household

Signature: ___________________________ Date: ______________________

Return application and supporting documents to:

Student Services Coordinator
Office of Public Health & Professional Degree Programs
Tufts University School of Medicine
136 Harrison Avenue, M&V Suite 142
Boston, MA 02111
victoria_a.lee@tufts.edu

APPLICATION DEADLINES:

MPH & MS-Health Communication Programs: March 1st

MS-Biomedical Sciences Program: July 1st

Scholarship Committee:

Date Application Received: ___________________________ Initial: ___________

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