

OFFICIAL APPLICATION
Kappa Psi Pharmaceutical Foundation, Inc. Scholarships

Please read instructions carefully before completing the application. Complete all sections. A photocopy of this form may be used, but original signatures must be provided on the top copy. The original and three (3) copies of the completed application, supporting documents, and letters of recommendation must be received no later than May 15th.

Name _____
LAST FIRST M.I.

Present Address _____

Telephone () _____ () _____ () _____
HOME WORK FAX

Kappa Psi Chapter Name _____ **Date of Initiation** _____

Summer Address, if different from above

Education

INSTITUTION / LOCATION	DEGREE	YEAR	MAJOR
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Present Academic Status _____

List Membership in any Professional, Scientific, Scholastic or Honor Societies

List Scholarships or Fellowships held indicating places and period of tenure and studies pursued

Anticipated Date of Graduation _____
MONTH YEAR

Anticipated Degree (please check one) B.S. _____ Pharm.D. _____

Supporting Documents

NOTE: Please provide an original and three (3) copies of each supporting document.

1. On a single sheet include a statement about your involvement in the professional aspects of your Kappa Psi Chapter.
2. Include a one-page letter stating why you are pursuing a Pharmacy career and your career goals, or why you are interested in a graduate degree, if applicable. If the student is especially interested in emphasizing retail, hospital, or clinical practice, it should be noted in this section.
3. On a separate sheet include the following paragraphs
 - a. A paragraph or two describing your fraternal and intra-fraternal service activities and offices held.
 - b. A paragraph or two describing your campus and community service activities and offices held.
 - c. A paragraph or two describing your extracurricular activities; such as, honors, awards, and honor societies.
4. Include a resume.
5. Submit an official copy of your College of Pharmacy transcript and official copies of all other transcripts from institutions of higher learning.
6. Submit letters of recommendation from your Grand Council Deputy, the Dean of the school and one other. NOTE: All application materials must be mailed to arrive by 5:00pm, May 15th, directly to the Secretary of the Foundation at:

Kappa Psi Pharmaceutical Foundation
The Central Office
2060 N Collins Blvd Suite 128
Richardson, TX 75080-2657

