

**Florida Pharmacy Foundation
Scholarship Application
Due Date: February 1, 2010**

I. General Information

Name (Mr/Ms/Mrs) _____

Street Address _____ Apartment Number _____

City _____, State _____ Zip Code _____

Telephone Number (____) _____ - _____ Cell Phone (____) ____ - _____

E-Mail Address _____

College of Pharmacy _____

(Please include campus site location.)

Current Level P1 P2 P3

Overall GPA _____

(Must be at least 3.2)

YOU MUST BE ENROLLED IN A FLORIDA COLLEGE OF PHARMACY

II. Statements

A. Brief outline of scholastic achievements

B. List of professional involvement

C. List volunteer or community involvement

PLEASE CHECK ONLY ONE SCHOLARSHIP PER APPLICATION

III. Special Requirements for different applications

Please mark the scholarship you are applying to:

- A. **Harris and Hamilton Family Scholarship** _____
- Must be a son, daughter, or immediate family member of a current Florida Pharmacy Association member, who has been a member for at least 5 years.
 - Copy of most recent transcript
 - A letter from the dean or a school official familiar with the student's activities. The letter should briefly describe the student's extracurricular accomplishments, leadership qualities, and contributions to the school.
 - A letter from the applicant outlining his or her academic and citizenship accomplishments and objectives for the future.
 - A cash award of \$1000
- B. **Juanita L. Haines Charitable Foundation** _____
- Write an essay of 300 words or less on "How to Provide Pharmaceutical Care to Patients with Cancer."
 - A cash award of \$1500
 - A copy of most recent transcript
- C. **James A. Mincy Independent Pharmacist Scholarship for FAMU and University of Florida Students** _____
- Please list any family members in the pharmacy profession or others that might have had an impact on your decision to enter the profession of pharmacy.
 - Write an essay of 500 words or less on "Opportunities in Independent Pharmacy Practice."
 - A cash award of \$500 (Four \$500 individual cash awards.)
 - A copy of the most recent transcript
- D. **1-800 PetMeds Scholarship** _____
- Write an essay of 300 words or less on the topic of "The Role of the Community Pharmacist in Veterinary Dispensing. It's Not Just Compounding."
 - A cash award of \$500
 - A copy of the most recent transcript

- E. James B. and Patsey J. Powers Scholarship** _____
- Write an essay of 300 words or less on the topic of “The Roll and the Benefits of the State Association to the Profession of Pharmacy and the Importance of Belonging”.
 - A cash award of \$500
 - A copy of the most recent transcript
- F. Volusia/Flagler County Pharmacy Association Scholarship** _____
- For 3rd or 4th year pharmacy students
 - Provide references and be willing to submit to a background check
 - Write a 300-500 word essay exhibiting the need for the scholarship and what he/she expects to contribute to the profession of pharmacy after graduation.
 - The applicant must be from Volusia or Flagler counties
 - A cash award of \$1,000 (Two \$1,000 individual cash awards).
 - A most recent transcript
- G. Walgreens Scholarship** _____
- Write an essay of 300 words or less “Retail Pharmacy in the Future”
 - Student should be entering one of their last three years of pharmacy school
 - Student should demonstrate outstanding leadership and communication skills
 - Student should have an interest in retail community pharmacy practice
 - Student should be involved in volunteer work, ie: brown bag day
 - Student should have a minimum overall GPA of 3.2
 - A cash award of \$1500
 - A most recent transcript
- H. Leon County Pharmacy Association** _____
Florida A&M College of Pharmacy Student Only
- The candidate must be a graduate of a high school in the five county area of the Leon County Pharmacy Association: Leon, Gadsden, Jefferson, Wakulla or Franklin counties
 - Provide an essay 300-500 words as to the need of the scholarship, in addition, what will the scholarship mean to you
The candidate must be willing to attend a Leon County Pharmacy meeting
 - A cash award of \$500
 - A most current transcript

Continued

V. Please Include:

- a. A resume and/or CV for each scholarship application
- b. Include a transcript for EACH application
- c. Provide four(4) copies of EACH application
- d. Mail applications to:
 - i. Patsey J. Powers
Executive Vice President
Florida Pharmacy Foundation
610 N. Adams Street
Tallahassee, FL 32301
Telephone: (850) 222-2400
E-Mail: ppowers@pharmview.com