



Ann and Barry Klein Commitment to Community Scholarship

Application

Student Name: _____

Student ID: _____

Class of: 2019 2020

Community Service completed in Summit County, Ohio:

Please submit the following along with this application:

- Resume or CV; and
- Essay describing your community service that has taken place in Summit County and the impact you feel this service will have on your career as a health care professional. Essay not to exceed two pages.

The following items will be submitted by the Office of Enrollment Services along with this application:

- NEOMED Transcript

I grant permission for the Office of Enrollment Services to provide my transcript to the Scholarship and Awards Committee for the purpose of selecting a scholarship recipient.

Student Signature: _____ Date: _____

Application Deadline: March 15, 2018

The recipient will be notified by May 1, 2018, and the scholarship will be applied to the student's educational expenses for next academic year (2018-2019).

Applicants must submit their application materials in one packet to the Office of Enrollment Services, c/o Sarah Moore. Submissions may be made in person or electronically (smoore@neomed.edu). For more information, call 330.325.6292.