

# UPSTATE MEDICAL ALUMNI FOUNDATION

## NOTICE OF FINANCIAL AWARD OPPORTUNITY: 2008 BASIC INFORMATION APPLICATION FORM

**To:** Class of 2011 College of Medicine Student

**From:** Vincent J. Kuss, Executive Director

**Re:** Frederick W. Sloan, M.D., '74 Scholarship

Applications now being accepted for the **\$1,250 Frederick W. Sloan, M.D., '74 Scholarship**. Please sign and submit this Basic Information Application Form to us by **March 7, 2008**. All other materials are due to us by **April 25, 2008**. The scholarships will be awarded at the Annual Medical Alumni Scholarship Reception on September 19, 2008, and will offset tuition for spring 2009.

### Scholarship Requirements:

1. College of Medicine student currently in their first year
2. Good academic standing
3. Biographical sketch describing career goals, academic and intellectual interests  
**TYPED SINGLE OR DOUBLE-SPACED, NO LONGER THAN 1 PAGE**

### Please submit all materials to:

Vincent J. Kuss, Executive Director, Upstate Medical Alumni, Setnor Academic Bldg,  
Ste.1510, 750 E. Adams St., Syracuse, NY 13210

Fax: (315) 464-4360

**Applicant's Name:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Anticipated Date of Graduation:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

I understand that the information contained in my application is for the purpose of the Medical Alumni Foundation to evaluate and consider my request to receive the Sloan Scholarship. I understand that the Medical Alumni Scholarship Committee may contact officials at Upstate Medical University to discuss my application and give permission for this to occur.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_