



Student National Pharmaceutical Association
NPhA Foundation-Rite Aid Scholarship Award



Purpose

The NPhA Foundation Scholarship Award, sponsored by the National Pharmaceutical Association (NPhAF) was established in 2001, to reward SNPhA, and who are dedicated to promoting the profession of pharmacy. Rite Aid provides this award in conjunction with NPhAF to aid in the education of future pharmacy, Rite Aid provides this award in conjunction with NPhAF to aid in the education of future pharmacists who meet the established eligibility criteria outlined below.

Eligibility Criteria

1. Applicants must be an active SNPhA member (active for at least one year).
2. Applicants must complete an application form.
3. Applicants must have some community/retail pharmacy experience.
4. Submit a resume outlining leadership experience and a one-page statement indicating why you should receive this award.
5. Submit two letters of recommendation: one must be from a professor or faculty member and the other should be from a employer or supervisor at work. Recommendations from family members are not acceptable.
6. Applicants must be in good academic standing (i.e. a minimum cumulative grade point average of 2.75 on a 4.0 scale) and be enrolled full time in the 1st through 4th professional year of an accredited pharmacy program.
7. Submit an official transcript.
8. Past national officers *are* eligible to apply. Current SNPhA officers and current recipients of other NPhAF scholarships are in eligible to apply.
9. All applications **must** be received at SNPhA Headquarters by February 1st.

Award

Qualified applications will be reviewed and considered for selection. If selected as a recipient, the student will receive one \$1, 000 (one thousand dollars) award.

Recipients will be announced at the national convention during the NPhA Opening Session.
Students must be in attendance in order to be eligible to receive the award.

Student National Pharmaceutical Association

The *NPhA* Foundation Scholarship Award

Application

Name of Student: _____

Address: Summer _____

Permanent _____

Telephone: _____

Email Address: _____

Classification:

1st Professional year

3rd Professional Year

2nd Professional Year

4th Professional Year

GPA: _____

Graduation Year: _____

SNPhA Region: _____

School: _____

Signature _____ **Date:** _____

Mail Completed Materials To: Dr. Carmita A. Coleman; SNPhA

University of the Incarnate Word

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