

**WESTCHESTER & ROCKLAND SOCIETY OF
PHARMACISTS**

NICHOLAS CICCARONE MEMORIAL SCHOLARSHIP

APPLICATION

Please print or type all information

NAME OF STUDENT

HOME ADDRESS

CITY/STATE/ZIP

TELEPHONE

NAME OF UNDERGRADUATE INSTITUTION YOU ATTEND

EXPECTED GRADUATION DATE

CUMULATIVE GRADE POINT INDEX

INTENDED AREA OF PHARMACY PRACTICE: (CHECK ONE)

COMMUNITY CHAIN HOSPITAL RESEARCH

OTHER (describe): _____

THIS FORM MUST BE ACCOMPANIED BY THE FOLLOWING:

- **AUTOBIOGRAPHICAL ESSAY** of approximately 500 words (to include, but not be limited to, why pharmacy was chosen as a profession).
- **LETTER OF RECOMMENDATION FROM THE DEAN OF THE RESPECTIVE PHARMACY SCHOOL WHICH INCLUDES CUMULATIVE GRADE POINT AVERAGE.**
- **APPLICANT'S RESUME OR CURRICULUM VITAE** (To include a list of work experience and extra curricula activities).

ALL SUBMISSIONS MUST BE RECEIVED BY April 29th , 2005

PLEASE NOTE NEW ADDRESS

Mail to:

Westchester & Rockland Society of Pharmacists

Attention: Scholarship Selection Committee

172 South Broadway White Plains, NY 10605 (Ground Floor)

2005 NICHOLAS CICCARONE MEMORIAL SCHOLARSHIP

ELIGIBILITY:

The Westchester & Rockland Society of Pharmacists is pleased to announce the 2005 Nicholas Ciccarone Memorial Scholarship award. Any full-time fourth year pharmacy student enrolled in an accredited pharmacy program within New York State is eligible to apply for the \$1,000.00 scholarship for the 2005 academic year.

APPLICATION PROCESS

Each applicant must complete a Nicholas Ciccarone Scholarship Application form. In addition, the student must provide the following materials with the completed application:

- A resume or curriculum vitae describing the student's work, professional experience, and extra curricula activities.
- An Autobiographical essay of approximately 500 words including, but not limited, to why pharmacy is his/her chosen profession.
- A letter of recommendation from the Dean of the Respective Pharmacy school which must include cumulative grade point average.

AWARD CRITERIA:

The award will be made on the basis of the following priorities:

- **AUTOBIOGRAPHICAL ESSAY:**
A 500 word essay including, but not limited to, why pharmacy is his/her chosen profession
- **RESUME/CURRICULUM VITAE:**
Based on content, neatness and extra curricula activities.
- **CUMULATIVE GRADE POINT AVERAGE:**
A student's grade point average will be given its proper consideration.
- **RECOMMENDATIONS:**
Any recommendation from the Dean of Pharmacy school will be considered as additional worthiness.
- **INTENDED AREA OF PHARMACY PRACTICE:**
Choice of intended practice will be considered.
- **ACCEPTANCE OF AWARD:**
Application form and supporting documents must be received by the Westchester and Rockland Society of Pharmacists by April 29th, 2005.

The \$1,000.00 Nicholas Ciccarone Memorial Scholarship Award will be presented to the recipient at the Westchester and Rockland Society of Pharmacists 100th Annual Installation Dinner (date to be announced). The recipient must be available to receive the scholarship award in person. If a recipient is unable to accept in person, an alternative recipient will be named.

This award is made on an individual basis and is not transferrable.