

NJSOPHE AWARDS & SCHOLARSHIPS
Dr. Karen Denard Goldman Academic Scholarship Application



Background Information

Name Phone Number

Mailing Address

Email Address

Are you a current member of NJSOPHE? Yes No

 If yes, how long have you been a member?

Academic Information

School, College or University	Location	Years Attended	Major	Degree Obtained
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Did you graduate within the last 7 years? Yes No

 If yes, what was your overall GPA?

Professional History

Please provide a copy of your current resume including all relevant work and volunteer experience related to health education.

Personal Statement

Please provide a 1-2 page personal statement/self-assessment. Briefly state your professional goals and describe key lessons learned based on your work, academic, and volunteer health education experiences. Describe how you will use the scholarship funds to further your academic/professional goals.

FOR REVIEW ONLY

Reference

Please provide one letter of reference from an individual who is familiar with your professional skills and abilities. The reference letter should be from a professor, supervisor, or colleague who has worked with you on a health education project/activity. The reference letter can be sent separately but no allowances will be made for late or non-receipt.

Special Instructions

Make sure to include the following documents:

- This application
- Your current resume
- Personal statement
- Letter of reference

Please note: Winners of the academic scholarship are asked to provide a brief report within one year after receiving the award. The report should include how the funds were used and any accomplishments, learnings or achievements gained.

If selected, I agree to provide a brief report within one year of receiving the award.

Signature

Date

E-mail your completed application and required documents to:

Krista M. Reale

njsopheawards@gmail.com

Applications must be received by Friday October 15, 2021