University of Iowa Department of Pathology



Marilyn Ohm-Smith

# Scholarship application for Graduate Students

## Application information

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full name: |  |  | | | | | |  | Date: |  |  |
|  |  | Last | | | First | | M.I. |  |  |  |  |
| Program of Study |  |  | | | | | |  | Mentor |  |  |
|  |  |  | | | | |  |  |  |  |  |
| Email: |  |  | | | | | |  | Student ID |  |  |
|  |  |  | | | |  |  |  |  |  |  |
|  | | |  |  | | | | | | | |
| Anticipated date of Graduation: | | |  |  | | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Are you a first-generation student | | |  | Yes | No |  |  |
|  |  |  | | | | | |

## Please describe any academic and/or scholarly achievements:

**Please describe challenges or barriers that you have encountered or perhaps still face in the pursuit of your academic goals:**

## Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signature: |  |  |  | Date: |  |  |