

University of Nebraska Medical Center
College of Public Health

Public Health Workforce Expansion Scholarship

Application Form

Applicant First and Last Name						
Address		City		State		Zip
Telephone			E-mail			
Indicate Academic Program	_____ Certificate _____ Master of Public Health					
# of Courses You Plan to Register	_____ Fall 17 Term _____ Spring 18 Term					
Current Employer						
Name of Employment Contact						
Title of Employment Contact						
Work Email of Employment Contact						

Eligible Candidates

- Employment by a public health non-profit, the Department of Health and Human Services, a local public health department or federally qualified health center serving Nebraskans in the **State of Nebraska**.
- Admission in a UNMC College of Public Health Certificate or Master of Public Health program.
- Support of employer to pursue graduate level education.

How to apply:

1. Completion of the Application Form
2. Provide letter of support from employer (Supervisor or Human Resources Representative)

Please email application materials to:

*Please title the email "Public Health Workforce Expansion Scholarship"

Jessica Tschirren
Director of Student Affairs
itschirren@unmc.edu

Final Deadline for submission acceptance is **July 1st, 2017**. Scholarship applications will be considered as they are received. Applicants are encouraged to apply as soon as they have been admitted to a Certificate or Master of Public Health program.