

Application deadline (postmarked by): **March 15, 2018**

## **PARTNERS IN PHARMACY SCHOLARSHIP APPLICATION INSTRUCTIONS**

*PIP typically awards up to 10 scholarships annually.*

### **Eligibility**

All pharmacy students who are student members of NCPA ([www.ncpanet.org](http://www.ncpanet.org)) are eligible to apply for the **Partners in Pharmacy Scholarship**. The student must be enrolled in an accredited U.S. school or college of pharmacy on a full-time basis during the academic term that the scholarship is awarded. **Note:** Students may only receive this award one time.

Children of Partners in Pharmacy officers, NCPA Foundation officers, NCPA officers, or NCPA Executive Committee members are not eligible to participate in the program.

### **Application Process**

The Scholarship Application Form is on the next page and **includes the maximum number of pages** for the documents requested below.

Each applicant must complete the Scholarship Application Form. In addition, the student must provide the following materials with the completed application:

1. Most recent official transcript of his/her college grades.
2. Letter from a school official familiar with the student's activities. This letter should briefly describe the student's extracurricular accomplishments, leadership qualities, and contributions to the school.
3. Letter from a pharmacy owner or manager, preferably an NCPA member. This letter should briefly describe the student's accomplishments, leadership qualities, contributions to the pharmacy profession, and pharmacist's knowledge of applicant's interest in independent pharmacy as a career.
4. Letter from the applicant to the **PIP Scholarship Committee** outlining his/her –
  - ❖ school and civic accomplishments and goals for the future,
  - ❖ demonstrated interest in independent pharmacy, vision for the development of innovative pharmacy practices, and other relevant details.
5. Résumé or curriculum vitae describing the student's work/professional experience.

Questions? Email [ncpaF@ncpanet.org](mailto:ncpaF@ncpanet.org) or call 800-544-7447.

Name _____ Date _____
Mailing address _____
Email _____ Telephone number _____
NCPA member ID # _____ Expiration _____
Have you been awarded other scholarships for the 2018-2019 academic year? ___yes ___no <i>(If yes, please list on a separate sheet of paper, including amount awarded.)</i>
Name of accredited U.S. school/university you attend _____
Expected graduation date (MM/YY) _____ GPA _____

**Submit the following, preferably in one packet.**

- This application form.
- Most recent official academic transcript. \_\_\_Enclosed \_\_\_To be mailed
- Letter from school official (**one-sided, 2 pages maximum**) \_\_\_Enclosed \_\_\_To be mailed
- Letter from pharmacy owner/manager (preferably an NCPA member) \_\_\_Enclosed \_\_\_To be mailed  
**(One-sided, 2 pages maximum)**
- Letter from student to **PIP Scholarship Committee** briefly outlining:
  1. School/civic accomplishments and goals for the future, and
  2. Demonstrated interest in independent pharmacy, vision for innovative pharmacy practices that stress quality patient care, or other details related to the scholarship criteria listed on the website.

**One-sided, 2 pages maximum on plain, white copy paper.** Please put your name in the header or footer.
- Applicant's resume or CV (**one-sided, 2 pages maximum on plain, white copy paper**)

**Mail to:**  
PIP Scholarship Committee  
NCPA Foundation  
100 Daingerfield Rd \* Alexandria, VA 22314

Visit [www.ncpafoundation.org](http://www.ncpafoundation.org)