Alpha Mu Tau Fraternity
and
American Society for Clinical Laboratory Science E & R Fund Inc.
GRADUATE SCHOLARSHIP APPLICATION

GRADUATE SCHOLARSHIP GUIDELINES

1. Applicant must be attending a US institution of higher learning.

2. Applicant must be a member of ASCLS (American Society for Clinical Laboratory Science).

3. Applicant must be currently/actively enrolled and have completed at least one semester in an approved Masters or Doctoral Program (Ph.D. or EdD) or Doctorate in Clinical Laboratory Science (DCLS) in areas related to clinical laboratory science including Clinical Laboratory Education or Management Programs.

4. Applicants cannot complete their education before September 30th.

5. Applicant must be a US Citizen or Permanent Resident.

6. **IMPORTANT: Download this form to your computer. Then open the file on your computer. Fill-in the application and save again to your computer.**
   a. **Please label your file as follows:** LastName.FirstName.Grad.pdf
   b. **Only type-written** applications will be evaluated; resumes/curriculum vitae/photos are not acceptable replacements for the application.
   c. ***Scanned / image application forms will not be accepted***.

7. **A recipient may receive only one scholarship per education level.**

8. Required documents in addition to this application include **2 letters of recommendation (LOR), 2 performance score (PS) sheets and official college transcript(s).**
   a. Letters of Recommendation and Performance Sheets must be submitted electronically by the evaluator directly to the AMTF email; **amtfscholarship@gmail.com.**
      - One LOR which confirms enrollment status requirements and PS must be from the Graduate Program Director or Graduate Advisor
      - One LOR and PS should be a professional/personal reference (non-relative) regarding the applicant's work ethic.
   b. Official transcripts from each college/university attended must be submitted electronically by the college/university directly to the AMTF Executive Secretary at amtfscholarship@gmail.com.

9. Only **complete** applications received by **March 1st** will be evaluated. Complete applications include all above listed required documents. Transcripts must also be received by March 1st.

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Name _____ Phone _____

Permanent Address _____

_____ E-Mail _____

Business Address _____

_____ Phone _____

Graduate School Name _____

Graduate PD/Advisor _____

Address _____ E-Mail _____

Full Time ☐ Part Time ☐ Anticipated Graduation or Completion Date _____

Degree Sought: Master's Degree in _____

Doctoral Degree (Ph.D. or Ed.D.) in _____

Doctorate in Clinical Laboratory Science (DCLS) _____

Length of Program _____

ASCLS MEMBERSHIP

ASCLS Membership # (required) _____

Month & Year joined _____ Dues paid until _____

Only Members of ASCLS will be considered for scholarships.

I. EDUCATION/TRAINING

Request **an official transcript from each college/university**. Official transcripts must be sent electronically by the college/university directly to the AMTF Executive Secretary, at amtfscholarship@gmail.com

Complete the following table:

College/University	Dates Attended	Major	Degree Awarded

II. HONORS, CERTIFICATIONS, AND CITATIONS (List current certification if available; List awards or honors and include date awarded. Only include those related to College, or professional awards related to Clinical Laboratory Science. *Do not include* awards received during high school):

III. VOLUNTEER, EXTRA-CURRICULAR OR WORK EXPERIENCE: (List most recent first):

A. Professional Laboratory and ASCLS related

Employer/Organization	Position/job description	Dates of Service/Employment	Paid/Non-Paid

B. Non-Professional Laboratory related

Employer/Organization	Position/job description	Dates of Service/Employment	Paid/Non-Paid

IV. FINANCIAL NEED: (**Report ALL anticipated expenses and income/support on an annual basis**)
Do not leave any blanks in the form – enter "0" if appropriate

A. Expenses Related to Enrollment		**B. Sources of Income/Support for Enrollment**	
Tuition and Fees	$	**Scholarship(s):**	
Books	$	Name:	$

Rent/Mortgage (enter $0 if support from Parents/Spouse/Partners/Others in Column B includes payment for rent/mortgage)	$	Name:	$
Loans to be repaid	$	**Grants**	$
Transportation costs related to Course Work (e.g. gas, public transportation)	$	**Full time Work**	$
Other – please explain:	$	**Part-time Work**	$
		Support from Savings, Parents, Spouse, Partner, Others	$
Total	**$**	**Total**	**$**

V. ADDITIONAL: Briefly describe any additional financial circumstances not listed above, such as single-parent, sole-support, etc. If None, list "NA."

VI. PERSONAL STATEMENT: In a separate file, submit your Personal Statement Essay - see instructions for details.

VII. SUBMISSION: Applicant is responsible for assuring that all required documents have been submitted to the AMTF Executive Secretary, at amtfscholarship@gmail.com. A completed submission consists of:

1. Completed application form - typed and saved as a pdf;
2. Two letters of recommendation,
    a. One must be directly from the Graduate Program Director or Graduate Faculty Advisor (including validation of program admission)
    b. Submitted electronically by the evaluator directly to amtfscholarship@gmail.com;
3. Two Performance Sheets,
    a. One must be directly from the Graduate Program Director or Graduate Faculty Advisor
    b. Submitted electronically by the evaluator directly to: amtfscholarship@gmail.com;
4. Official transcripts from each college/university attended submitted electronically by the college/university directly to the AMTF Executive Secretary, amtfscholarship@gmail.com.

We will NOT notify applicants of missing documents and only COMPLETE application packets will be reviewed.
If you want to be notified of receipt of your application, reenter your email address here:
_____.

Application documents must be submitted to the AMTF Executive Secretary, **no later than March 1st** at amtfscholarship@gmail.com.