



INTERNATIONAL STUDENT SCHOLARSHIP APPLICATION

This scholarship application will be used to determine awards for the International Peace Scholarship (MD and DVM) and the Global Medicine Scholars Award (for those attending the KBTGSP program in the UK). If you have applied for the Commonwealth Scholarship and do not receive it, you will automatically be reviewed for the IPS and/or GMS.

Entering Term: August Term 20 _____ January Term 20 _____

Program: MD KBTGSP DVM

I. Personal Data

ID number (A00)

Last Name (Family Name)

First Name

Middle Initial

Former Last Name (if any)

Date of Birth (MM/DD/YYYY)

Country(ies) of Citizenship

Country(ies) of Legal Residence

I. Essay

Please describe your commitment to enhancing health care in the country in which you intend to practice. Maximum 250 words.

This scholarship application will be reviewed when the Confidential Financial Statement section of your academic program application has been received. Please email this form to your Admission Counselor.