

**LOS ALAMOS/RIO ARRIBA MEDICAL SOCIETY**

Los Alamos Medical Care Clinic

3917 West Road, Suite 150

Los Alamos, NM 87544

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Telephone\_\_\_\_\_Fax\_\_\_\_\_

Alternate Address C/O\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Telephone\_\_\_\_\_Fax\_\_\_\_\_

Date of Birth\_\_\_\_\_

Social Security Number\_\_\_\_\_

Sunflower First National 1870 Wealth Management must report all trust disbursements to the Internal Revenue Service, thus your social security number is required. Applications without this information will not be considered.

Are you currently enrolled in medical school? Yes\_\_\_\_\_No\_\_\_\_\_

If not, are you currently enrolled in college? Yes\_\_\_\_\_No\_\_\_\_\_

Name of school\_\_\_\_\_

Year of Graduation\_\_\_\_\_

Rank in Class or Quartile\_\_\_\_\_

Estimated expenses: Tuition & Books\_\_\_\_\_

Room & Board\_\_\_\_\_

Other\_\_\_\_\_

How long did you reside in Los Alamos or Rio Arriba County?\_\_\_\_\_

Please attach a copy of your medical school transcript (if currently a medical student) or your most recent college transcript if you are accepted but haven't started.

Please attach a letter discussing your connection to Los Alamos or Rio Arriba county, current medical studies (if in medical school), your plans or areas of interest within medicine, and your extracurricular activities related to medicine or community service.

Submit by August 7<sup>th</sup>, 2019 to Lori Whitley, MD, Attn: Scholarships, 3917 West Rd Suite 150, Los Alamos, NM 87544.