

# James O'Reilly International Student Scholarship

## **Purpose and Stipulations**

The James O'Reilly International Student Scholarship is available to currently enrolled international students in the MPH Program. The Scholarship will be used to pay for tuition up to one year or 2 semesters for an awarded recipient. The awarded recipient is expected to meet in the following criteria:

1. Recipients must originate from countries considered third-world by current standards and demonstrate verifiable financial need;
2. Recipients must demonstrate excellence in academic activities in the MPH program;
3. Recipient must intend to return to their countries with the vision of utilizing their degree to improve public health and expand UC's footprint globally.

## **Qualification**

An MPH student who meets the following criteria can apply for the Scholarship:

1. The applicant is currently a full time student in the MPH Program;
2. The applicant has completed at least one semester of studies in the MPH Program;
3. The applicant is currently holding a F-1 or J-1 visa;
4. The applicant's home country is considered as the third-world country based upon the criteria used in the world organizations such as the World Bank;
5. The applicant is planning to go back to the home country to work within 6 months after receiving the MPH degree from UC.

## **Application**

The students will complete and submit the application to

Professor Charles Doarn  
Director, MPH Program  
Department of Environmental Health  
University of Cincinnati College of Medicine  
G12A Kettering Lab  
160 Panzeca Way  
Cincinnati OH 45267-0056

EMAIL: Charles.Doarn@uc.edu

The application package should include:

1. The application form (See Appendix I);
2. A personal statement or an essay (2-3 pages) to justify the applicant's qualification for the award;
3. Other documentation including copies of transcripts, visa and passport and income and asset information in support of applicant's stipulations in 1-3.

The application deadline will be 2 weeks after announcement. The recipient will start the scholarship in the next semester.

**Appendix I: James O'Reilly Scholarship Application Form (Confidential)**

**A. Your Personal Information**

1. Your Name \_\_\_\_\_
2. Your Permanent Address: \_\_\_\_\_
3. Your Email Address: \_\_\_\_\_
4. Your Mailing Address (if different from above): \_\_\_\_\_
5. Your Date of Birth (mm/dd/yyyy): \_\_\_\_\_
6. Your County of Birth: \_\_\_\_\_
7. Your Country of Citizenship (if different from above): \_\_\_\_\_
8. Your Visa status (F-1, J-1, other please specify): \_\_\_\_\_

**B. Your Academic Record**

9. Are you are full time student at MPH Program: \_\_\_\_\_
10. When do you begin your studies in MPH Program (Semester/Year): \_\_\_\_\_
11. List all MPH courses you have taken so far (including the current semester):
  - 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_
  - 5) \_\_\_\_\_
  - 6) \_\_\_\_\_
  - 7) \_\_\_\_\_
  - 8) \_\_\_\_\_
  - 9) \_\_\_\_\_
  - 10) \_\_\_\_\_
12. You GPA from MPH courses (not including the current semester): \_\_\_\_\_
13. You GPA from MPH courses (not including the current semester): \_\_\_\_\_

**C. Your Family Information**

14. Your Father's Name: \_\_\_\_\_
15. Your Father's Age: \_\_\_\_\_
16. Your Father's Occupation: \_\_\_\_\_
17. Your Father's Annual Income: \_\_\_\_\_
18. Your Father's Address: \_\_\_\_\_
19. Your Mother's Name: \_\_\_\_\_
20. Your Mother's Age: \_\_\_\_\_
21. Your Mother's Occupation: \_\_\_\_\_
22. Your Mother's Annual Income: \_\_\_\_\_
23. Your Mother's Address: \_\_\_\_\_
24. How many siblings do you have in your family: \_\_\_\_\_
25. How many family members including you depend on the income of your parents for living expense: \_\_\_\_\_
26. Are you married: \_\_\_\_\_
  - a. If you are married, do you have a child (or children)? \_\_\_\_\_
  - b. If you are married, is your spouse living with you in the United States? \_\_\_\_\_
  - c. If you have a child (or children), is she (or he or are they) living with you in the United States? \_\_\_\_\_
27. Who is your major sponsor for you (and your family) to study and live in the United States? \_\_\_\_\_

States: \_\_\_\_\_

28. Your sponsor's contact information: \_\_\_\_\_

29. Do you receive any financial support from your government? \_\_\_\_\_

a. If yes, how much (in \$) have you received from your government so far? \_\_\_\_\_

30. Do you receive any financial support from an agent in the United States? \_\_\_\_\_

a. If yes, how much (in \$) have you received from the agent so far? \_\_\_\_\_