



National Society for Histotechnology
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Ellicott City, MD 21043
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www.nsh.org

Application for the Peggy Wenk Histology Program Scholarship

Instructions

1. All application materials, including this cover page, **must be received by May 31, 2019** to be considered.
2. All application materials should be submitted electronically using the applicant portal, or to natalie@nsh.org
3. To complete this application form, type responses directly into the gray boxes. If an electronic signature is not available, the applicant may type his or her name in the signature line or sign the completed, printed form and scan it to create a PDF copy.

Application Checklist

- Completed application form (including this page)
- Two letters of recommendation that support the program applying for this scholarship.
- One-page narrative that outlines the planned utilization of the funds.

APPLICANT INFORMATION

| | | |
|--|--------|------|
| Program Name: | | |
| Program Director Name: | | |
| Program Address: | | |
| City: | State: | Zip: |
| Country: | | |
| Phone: | Fax: | |
| Program Director Email Address: | | |
| Individual NSH Membership ID of the Program Director or Education Coordinator: | | |
| Is the Program Director and/or Education Coordinator applying for this scholarship an NSH member for the last 2 consecutive years? | | |
| University/Institution: | | |
| Department: | | |
| Study/Research Area: | | |
| Website of the program applying: | | |

APPLICANT CERTIFICATION

| | |
|--|------------|
| <input type="checkbox"/> By checking this box and signing/typing my name in the signature line, I certify that the application information provided is accurate and correct to the best of my knowledge. | |
| Date: | Signature: |