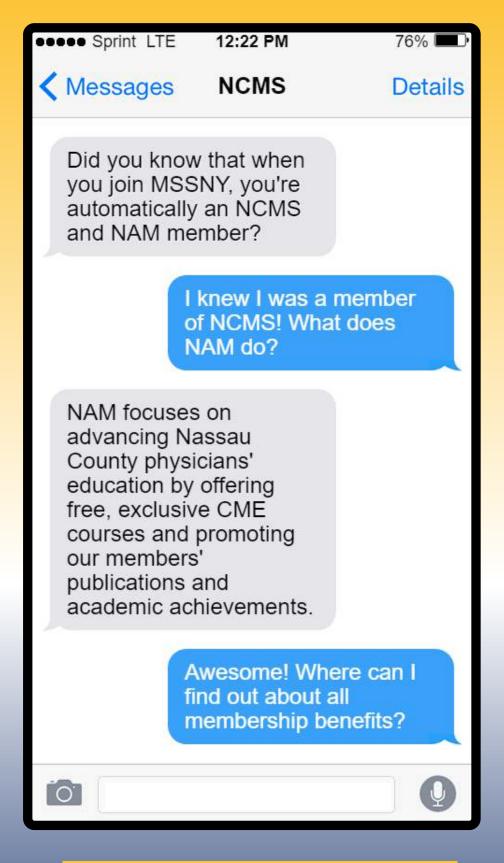


Inquire within for more information on how to apply!





MSSNY Membership Benefits

NCMS Membership Benefits





## PRIDE IN PROFESSION SCHOLARSHIP

The Nassau County Medical Society has been advocating for physicians, alongside the Medical Society of the State of New York, since 1921. In an effort to further support the medical profession, the Society founded its sister organization, the Nassau Academy of Medicine, in 1953. As stated in the charter of the Nassau Academy of Medicine, the Academy's purpose is "to provide educational opportunities and training of a postgraduate nature for members of the Medical profession of Nassau County, a place to establish and maintain a medical library, and to diffuse among the people knowledge of the achievements of scientific medicine."

The evolution of the field of medicine depends solely on the physicians' knowledge and their ability to implement it ethically in their practices. At the Nassau Academy of Medicine, our goal is to create a space where physicians will not only further their education, but also promote the prosperity of the profession by sharing their findings and forming long-lasting connections with fellow physicians. As we begin to grow our organization, we are committed to our mission of uniting physicians and promoting positive change.

We intend to become a reliable educational resource for our members throughout the entirety of their medical career: from their medical school education to their residency and from their active practice in medicine to their retirement. Just as we take pride in our members' accomplishments, it is our duty to promote pride in the profession by instilling security in the community that we create. When you become active members of the community, you contribute to the longevity of the Academy and afford us the opportunity to provide unconditional support for years to come.

Our medical school students are the physicians of tomorrow and the future of the Nassau Academy of Medicine. As such, it is our distinct privilege to present the Pride in Profession Scholarship. We envision the scholarship recipients utilizing this to advance their education and their medical careers. In all that you do, we hope you take pride in passing on what you have learned to the next generation of physicians, becoming mentors to those who enter the profession after you, and shaping the evolution of the medical field.

## **PRIDE IN PROFESSION**

## Scholarship Application Form

Name		Age	2
Last	First	Initial	
Address			
Street or PO Box	City	State	Zip
Home Phone Number		Cell Phone N	umber
County in which School is	Located		
PRE	ESENT ST	ATUS AS A S	TUDENT
I will graduate from			in 20
	M	1edical School	
For my application to b submitted with this app		d, Part II of thisap	pplication form is to be
1. What Medical So	chool are you	u attending?	
2. What specialty a	are looking to	o go into?	
	List of two references, one of which can be a personal reference or a professional reference outside of the medical field. (**This request is OPTIONAL)		
Name:			
Address:			
Occupation:			
Name:			
Address:			
Occupation:			

## SCHOLARSHIP APPLICATION FORM PART II

Selection will be determined by a committee using, but not limited to, the following criteria.

1.	All school activities/awards/recognition/leade	rship.
2.	Non-school activities/awards/recognition/lead	lership.
3.	Work experience	
4.	Please attach a short essay (200 words) regarderer and educational goals.	ording your financial needs and
schola Stavro stavro	rship. If you have questions or need additional savelidis, Executive Director at 516-832-23 ula@nassaucountymedicalsociety.org. Please sing address:	l information please feel free to contact 300 or
	NASSAU ACADEMY OF 666 OLD COUNTR SUITE 705 GARDEN CITY, N	Y ROAD
App	licant, Sign in Longhand	Date