

# OEFOM Endowed Scholarship

## Applications Due by February 28, 2025

### Criteria



*"Assisting Students in Achieving Their Dream of Becoming Osteopathic Physicians"*

#### Submission Requirements

1. A completed application form and a typed letter detailing qualifications for the scholarship award.
2. A typed letter indicating any specific financial criteria or factors that you believe will impede your commitment to osteopathic education without scholarship support, along with your anticipated postgraduate practice plans.
3. Letters of support from one osteopathic medical college faculty member, one osteopathic physician and one community leader. These letters will assist the selection committee in affirming standing with the college, professional demeanor, character, and ability and willingness to participate in community activities.
4. A transcript indicating cumulative GPA and class ranking.

#### Eligibility Criteria

**Scholarship applicants must be lawful residents of the United States and meet one of the following requirements:**

1. **Non-independent students** must have at least one parent, stepparent or court-appointed guardian who is an Oklahoma resident and who has claimed the applicant as a dependent on his/her federal income tax return for the previous year.
2. **Independent students** must have lived in Oklahoma in some capacity other than as a full-time student at a post-secondary institution for a period of at least 12 consecutive months prior to matriculation to medical school.

**Candidates must be able to demonstrate good standing at their college regarding academics, finances and conduct.**

#### Other Considerations

1. Preference will be shown to applicants who have completed two years of osteopathic medical education and who indicate a desire to practice in Oklahoma.
2. Class standing and cumulative grade point averages will be a major determining factor in granting scholarship awards.

Finalists may be interviewed by a designated Scholarship Committee comprised of members of the OEFOM and/or their designees.

Scholarship awards will be deposited with the Office of the Bursar of the College and credited for tuition, books, fees and other applicable educational expenses. Funds will not be payable directly to the student.

#### Other Information

Scholarship awards may be "stacked" with other scholarship awards or financial aid. However, the total of these awards, excluding loans, may not exceed the educational costs for the scholarship year.

OEFOM will make available the minimum amount of scholarship funds allocated by September 1, annually.

Applications are due by February 28, 2025 and awards will be announced at the OOA's Annual Convention taking place April 9-13, 2025.

Certain "named" scholarship funds may place additional restrictions on awards.

Candidates will be formally informed of amount and source of awarded scholarships.

# OEFOM Endowed Scholarship Application

## Please Complete the Following:

Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Hometown: \_\_\_\_\_

month day year

Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_ (check one)

Parent's Name: \_\_\_\_\_

Parent's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long have you lived in Oklahoma?: \_\_\_\_\_

High School, Community, Year of Graduation: \_\_\_\_\_

Pre-Med College(s): \_\_\_\_\_

Dates of attendance Degree

Dates of attendance Degree

Name of Osteopathic Medical College: \_\_\_\_\_

(Attach transcript indicating cumulative GPA and class rank)

Classification: \_\_\_\_\_ OMS-I \_\_\_\_\_ OMS-II \_\_\_\_\_ OMS-III

## Letters of Support

Each application must be accompanied by three letters of support, please indicate that information below:

\_\_\_\_\_  
Name (faculty member)

\_\_\_\_\_  
Name (osteopathic physician)

\_\_\_\_\_  
Name (community leader)

## CHECK LIST

- Application
- Typed Letter of Qualification
- Typed Letter of Financial Factors and Practice Plans
- Three Letters of Support
- Transcript
- Send to OEFOM

due February 28, 2025

### Please send applications to:

OEFOM 4848 North Lincoln Boulevard Oklahoma City, OK 73105-3335

or email: jacob@okosteo.org

### For more information:

(405) 528-4848 (800) 522-8379 toll free (405) 528-6102 fax

email: jacob@okosteo.org