



Educational Scholarship Nomination Form

Name of Candidate: _____

Permanent Address: _____

City, State, Zip code: _____

Telephone Number: _____ Email Address: _____

Is the candidate a member of the Virginia Environmental Health Association? Yes _____ No _____

If yes, number of consecutive months of membership: _____

Employment History: _____

Brief Description of Work-related Experience: _____

In what college/university are you presently enrolled? _____

Approximate expenses per year?

1. Tuition: _____
2. Room & Board: _____
3. Books: _____
4. Other fees: _____

Additional pertinent information: _____

Are you applying for an undergraduate or graduate scholarship? _____

Is the college/university you are attending accredited with Environmental Health Accreditation Council? _____

Is the college/university you are attending a sustaining member of NEHA? _____

Please write a short summary of your professional goals and include your reasons for pursuing a career in environmental health and/or public health. (200 words or less—attach to application if necessary).

Please list civic groups and other community activities of which you are a member. Also, please note any special honors received. _____

____ Attach two (2) letters of support from faculty and one (1) letter of support from an active VEHA member. Three total letters must be received.

____ Attach a copy of your official academic transcript from the college/university in which you are currently enrolled.

Email completed application and required attachments to: rachel.stradling@virginiaeha.org
Subject line: Educational Scholarship