

## SOUTHWESTERN OHIO HEMOPHILIA FOUNDATION 2023 Brad Miller Memorial Scholarship Application/Information

**Application Process:** Each application must include the following documents, sent together in one package:

- 1) Completed application (see next page)
- 2) Essay (see instructions below)
- 3) Proof of enrollment or letter of acceptance to a college or technical school
- 4) Letter from Hemophilia Treatment Center staff documenting a bleeding disorder diagnosis and that applicant is current with visits/treatment.

Contact Dayton Children's HTC:

- via email CoffeyC@childrensdayton.org
- or phone 937-641-5877
- 5) Letter of recommendation from a teacher, community member or employer
- 6) Copy of the most recent transcript with cumulative grade point average (GPA)

**Deadline:** Application and supporting documents must be submitted by July 13, 2022. No incomplete applications will be considered.

**Announcement of Scholarship Recipients:** Decision by the scholarship committee will be announced by July 30, 2023.

**Submission of Application:** The completed application and supporting documentation should be submitted electronically to <a href="mailto:joy@swohf.org">joy@swohf.org</a> or fax to 937-298-8080

**Questions:** For questions about the application process, please contact Sandra Hibner at <a href="mailto:sandraahibner@gmail.com">sandraahibner@gmail.com</a> or call the SWOHF Office during business hours at 937-298-8000

**Special Provisions:** Payment will be made directly to the student's university/college or technical school.

## **2023 Brad Miller Memorial Scholarship Application**

Last Name		F			
Home Mailing Add	lress/Street:				
City:		State	e:	ZIP:	
Email address					_
Daytime Telep	ohone Number: (	)			_
Date of Birth:	Month	Day	Year		
High School (if rec	ent graduate) or in	stitution current	ly attending:		_
Bleeding disorder	diagnosis:				_
• List a	ny academic honor	s, awards and m	embership ac	ctivities:	
activities, school/co	including those ass llege years:	ociated with the	bleeding disc	e interests, and extracurricular orders community, during your hi	
	ease limit your responder		rds or less. Pl	ease type your response, double	
• Di to • Di	further your educe	leeding disorder ation? rould like to shar	diagnosis hare	or. as affected or inspired your decist ger members of the community	on
		STATEMENT O	F ACCURACY	,	
I hereby affirm tham the my knowledge.	at all the above stat	ed information រុ	provided by n	ne is true and correct to the best	of
Signature:			Dat	to·	