

MLA SCHOLARSHIP FOR MINORITY STUDENTS

SUBMISSION INFORMATION

A scholarship of up to \$5,000.00 is awarded annually by the Medical Library Association (MLA) to a student who shows excellence in scholarship and potential for accomplishment in health sciences librarianship. The scholarship is announced at the annual meeting of the association, where the recipient will also receive a one-year student membership in the Medical Library Association and free inclusive student registration at the association's annual meeting.

ELIGIBILITY

- The applicant must be a member of a minority group, defined as Black or African-American, Hispanic or Latino, Asian, Aboriginal, North American Indian or Alaskan Native, or Native Hawaiian or other Pacific Islander.
- The applicant must be entering a Masters program at an ALA-accredited graduate library school or, at the time of the granting of the scholarship (February), have completed no more than one-half of the academic requirements of the graduate program.
- The applicant must be a citizen of or have permanent residence in either the United States or Canada.
- Past recipients of the MLA Scholarship or the MLA Scholarship for Minority Students are not eligible to apply.

TERMS

- The completed application form and accompanying materials must be received at MLA headquarters by **December 1**.
- Scholarship payments will be made in two equal installments, the period of disbursement not to exceed one year past the date of the annual meeting.
- The recipient will be notified in March before the annual meeting at which the public announcement is made.
- The recipient assumes all costs of attending the meeting and the ceremony at which the announcement is made. The association will underwrite the registration fees.
- Depending on the qualifications of the candidates, the jury may recommend that awards not be presented in a given year.
- MLA will acknowledge applications upon receipt via email.

SUBMISSION CHECKLIST

Please return the accompanying application and include the following materials. **All materials must be received at MLA by December 1.**

- ☐ Completed application;
- ☐ Two letters of reference sent directly to MLA Headquarters from persons who are knowledgeable about the applicant's character, education, and abilities;

- Official transcript sent directly from **each** college or university attended, including community college, undergraduate and graduate colleges attended; and
- Copy of your library school's catalog or Web page, which states the number of credits needed for your degree.

APPLICATION SUBMISSION

Send the completed application, along with supporting documents (email applications and documents will be accepted as PDF or MS Word files only) to:

Email: **grants@mlahq.org**; OR

Fax: **312.419.8950**; OR

Mail: **Medical Library Association**

ATTN: Grants and Scholarships

65 E. Wacker Place, Ste. 1900

Chicago, IL 60601-7246

MLA will acknowledge receipt of all applications. All applicants must receive an email notification that materials were received by MLA on or before December 1 for applications to be considered. **Incomplete applications will not be considered.**

MLA SCHOLARSHIP FOR MINORITY STUDENTS

APPLICATION

PART 1: APPLICANT INFORMATION

Name (Last, First, Middle): _____

Current address: _____

City: _____ State/Province: _____ Zip/Postal: _____

Address valid until (date): _____

Telephone: _____ Work _____ Cell _____ Home _____

Email address: _____

Please provide a secondary or permanent home address:

Address: _____

City: _____ State/Province: _____ Zip/Postal: _____

Country of citizenship or permanent residence status: _____ United States _____ Canada

What is your ancestry or ethnic origin?

_____ Black or _____ Hispanic or _____ Asian _____ Aboriginal, North _____ Native
African-American Latino American Indian, or Hawaiian or other
Alaskan Native Pacific Islander

PART 2: EDUCATION

List in reverse chronological order (i.e., the most recent first) all colleges, universities, and professional schools attended (add rows as needed).

Name and address of institution	Major/minor degree(s)	Years of attendance	Degree received or pending and year

If one of the sciences was not your major or minor subject, list the courses/credits you earned in specific science courses (add rows as needed):

Science courses	Number of credits

If you are currently enrolled in an ALA-accredited library school, provide the information below. If not currently enrolled, list the ALA-accredited library schools to which you have applied, and indicate those at which you have been accepted (add rows as necessary).

Library School	Indicate whether you are Enrolled/Applied/Accepted

For what time period (MM/YYYY to MM/YYYY) would the scholarship be used?

Will you be a full-time student? ☐ Yes ☐ No

If not, how many courses will you take each term? (*Please specify quarter or semester.*)

What is the anticipated date of your library degree (MM/YYYY)?

PART 3: EXPERIENCE

List below all full-time or otherwise significant employment you have held, starting with the most recent (add rows as needed):

Name/address of employer	Dates	Brief summary of duties

PART 4: OTHER ACCOMPLISHMENTS

Indicate any memberships in honor societies or professional organizations (add rows as needed):

Organization	Date(s)

Indicate any honors, awards, scholarships, or prizes you have received (add rows as needed):

Organization	Date(s)

Indicate any other activities, volunteer work, or interests (campus, community, other):

PART 5: REFERENCES

A copy of the reference form is on the last page of this application. Please provide a copy (paper or electronic) of that page to individuals who will be providing references for you. **References must come to MLA directly from the individual completing the reference and must be received by the December 1 deadline for your application to be considered.** You may wish to provide a stamped pre-addressed envelope to those who will be submitting their reference by mail.

List below the two individuals from whom you have requested a reference.

Name	Institution	Contact information (email, telephone)

PART 6: FINANCIAL AID

List all fellowships, scholarships, internships, assistantships, or loans for which you are applying or have applied; indicate which have been awarded or secured (add rows as necessary):

Description of financial aid	Indicate whether you have applied or have been awarded this financial aid

PART 7: CAREER OBJECTIVES

Include below or append to your application a short typed essay describing your career objectives and how your immediate academic plans will help you attain them:

PART 8: AFFIRMATION

I confirm that the information supplied on this application is true and correct to the best of my knowledge, and I understand that misrepresentation may cause denial or withdrawal of the scholarship.

Signature or (if submitting electronically) name of applicant: _____ Date: _____

SCHOLARSHIP REFERENCE FORM IS AVAILABLE ON THE NEXT PAGE.

MEDICAL LIBRARY ASSOCIATION SCHOLARSHIP REFERENCE FORM

Name of applicant: _____

The applicant should fill in their name above and provide this form to a person (not related to the applicant) who is acquainted with the applicant's character, education, and abilities.

TO WRITERS OF LETTERS OF REFERENCE

The applicant whose name appears above has applied for a scholarship from the Medical Library Association to attend an American Library Association-accredited graduate school. Please give us your candid opinion of the applicant's scholarship, personality, and potential for postgraduate study in library science. **In order for the application to be considered, your reference must be returned to MLA by December 1 via email, fax, or mail.**

Email:
grants@mlahq.org

Fax:
312.419.8950

Mail:
Medical Library Association
ATTN: Grants and Scholarships
65 E. Wacker Place, Ste. 1900
Chicago, IL 60601-7246

Please type or print legibly and sign the reference. Thank you for your assistance.

Name	Position/job title	Institution/Address/Contact information

Reference (please use the space below and additional space as necessary):

Signature or (if submitting electronically) name of reference: _____ Date: _____