



Alaska Pharmacists Association Pharmacy Technician Scholarship

Purpose: The purpose of the AKPhA Technician Scholarship is to assist Alaskan students pursuing Pharmacy technician courses or certifications at a University or Technical Program and encouraging their future practice in the state.

Eligibility: The applicant must be a high school graduate or hold a GED certificate, a resident of Alaska, and enrolled in a pharmacy technology curriculum or hold an Alaska Pharmacy Technician license.

Selection: Selected members of the Alaska Pharmacists Association will evaluate applicants on the following criteria:

1. Personal Qualities
2. Letters of Recommendation
3. Completeness of the Application
4. Financial Need
5. Grade Point Average (GPA)

Instructions: It is the applicant's responsibility to see that all supporting documents are submitted in one package or online in the order noted below.

1. Application form
2. Official School Transcript
3. Letters of recommendation
4. Personal statement

Online applications can be accessed at:

- <https://alaskapharmacy.org/resources/scholarships/>
- Verification of attendance and enrollment may be requested
- Letters of recommendation can be emailed to akphrmcy@alaska.net, if the reference prefers, with the student name in the topic line

If Mailing, send completed application to the following address. Please DO NOT require a delivery confirmation signature since staff may not be available for deliveries.

Alaska Pharmacists Association
c/o Scholarship Chairman
203 W. 15th Ave. Suite # 100
Anchorage, Alaska 99501

The amount of this scholarship is \$500.

Deadline for applications is November 30th.

Applicants will be notified of their status in December. No prior acknowledgements are made to applicants and all notifications are final.

TECHNICIAN SCHOLARSHIP APPLICATION FORM

PLEASE READ THE GENERAL INFORMATION AND INSTRUCTIONS BEFORE COMPLETING THE APPLICATION. RESPONSES TO ALL ITEMS MUST BE TYPED.

Name	
Email Address	
Address While at School	
Telephone	
Student ID Number	
Birthdate & Birthplace	
Name of College Enrolled	
Grade Point Average (GPA)	
How long have you been an Alaska resident?	
Name and Address of High School Attended	
Parent's Name, Address, Phone Number	
Other Awards or Honors Received	

PERSONAL STATEMENT: Please include with this application a one to two page, typed, personal statement in which you must address the following;

- 1.) Alaskan background
- 2.) Financial need for this Scholarship
- 3.) Your technician career goals and plans for program completion
- 4.) How you plan to help the AKPhA in helping others

Please include any other information relevant to this application.

The personal statement is one of the most important selection criteria and is the equivalent of an interview.

TRANSCRIPT: Please provide an official school transcript of your recent class work, if available.

REFERENCES: Two letters of recommendation are required. The reference writer should directly address the AKPhA Scholarship Committee and letters **must be original, signed letters**. Sponsor telephone numbers should be included for verification. The letters should be sent with the application or emailed as noted. At least one letter should be from a school official.

CERTIFICATION: All of the information provided is complete and accurate to the best of my knowledge. I hereby give the AKPhA permission to share this information for the purpose of recruitment, public relations and possible employment. I further certify that I am currently enrolled as a student and will use the AKPhA award toward the expenses related to my college attendance.

I hereby acknowledge that it is my responsibility to keep AKPhA informed of any address changes. Furthermore, I am aware that any scholarship check I may receive will be issued to the financial aid office of my college on my behalf. Falsification of information may result in termination of any scholarship granted and render me disqualified for future consideration of this scholarship. All application material becomes the property of the AKPhA.

SIGNATURE & DATE:
