

2022-2023 Baltimore Public Health Scholarship Application

Be sure to review [program eligibility](#) requirements and [application procedures](#) on our website.

Name (print)

Degree Program

Department

Name of High School

Date of Transcript Request

Part 1 Instructions:

To support your application for the Baltimore Public Health Scholarship: 1) attach your response to the following questions in a minimum of 200, maximum 400 words for each; 2) request your high school transcript to be sent to us directly from the school.

- 1) Tell us about your interest in public health.
- 2) Please tell us about your public health related experience including work and volunteer activities.
- 3) Please provide details on your involvement in any Baltimore City activities.
- 4) Upon completion of your degree, what impact would you like to have on the public's health?

Part 2 Instructions:

1. Complete the 2022-2023 [Free Application for Federal Student Aid \(FAFSA\)](#). Be sure to enter the Johns Hopkins Bloomberg School of Public Health - Code E00234 so that we receive your FAFSA data. *Applicants born on/after January 1, 1997, must provide parental data on their FAFSA application and the below Public Health Grant Application*.*
2. Complete the Public Health Student Aid Application. The application is available to admitted students in our SIS Self-Service system. To access, log in to your [SIS](#) financial aid record "To Do List".
3. Complete below:

Assets: (As of the date of your FAFSA Filing)	Student and Spouse	Parents*	Untaxed Income: (Not reported on FAFSA)	Student and Spouse	Parents*
Value of savings and checking			2020 Payments to tax deferred pensions and retirement savings plans		
Investment Value – include stocks, bonds, trust funds, real estate			2020 Child support received		
Business Net Worth			2020 Money received or paid on your behalf (e.g., bills, food, housing, cash)		

***Applications from students required but who fail to provide parental data on their FAFSA will be considered incomplete.**

I certify that the information on this form and attached is true and accurate. I understand that any misrepresentation may be cause for denial or revocation of a scholarship award.

Signature

Date

The Johns Hopkins University does not discriminate on the basis of race, color, gender, religion, age, sexual orientation, national or ethnic origin, disability, marital status or veteran status in any student program or activity administered by the University, or with regard to admission or employment. Questions regarding Title VI, Title IX, and Section 504 should be referred to the Office of Institutional Equity, Garland Hall 130, Telephone: 410-516-8075, (TTY): 410-516-6225.

Financial Aid Office

615 N. Wolfe Street, Suite E1002, Baltimore, MD 21205

410-955-3004 Phone 410-367-2161 Fax

Email: <https://support.sis.jhu.edu/case-home>