

University of Florida
 College of Public Health and Health Professions
 Ronald J. Spitznagel Service Fellowship Application
 Form Application Due: February 23, 2018

Personal Data		
Name _____	UF ID _____	
Address _____ _____	Email _____	
	Phone (cell) _____	
	Phone (other) _____	
US Citizen? Yes No	Ethnicity (optional) _____	
Academic Information		
Entered PHHP		Projected Graduation
Semester _____	Year _____	Semester _____ Year _____
Overall GPA _____	(if available) GRE Verbal _____	(if available) GRE Quantitative _____
GMAT (if applicable) _____		
Using the list below, enter the number of your degree program _____		
1. Master of Arts in Communication Sciences and Disorders	10. Ph.D. Audiology	
2. Master of Health Administration	11. Ph.D. Biostatistics	
3. Master of Health Science in Occupational Therapy	12. Ph.D. Epidemiology	
4. Master of Occupational Therapy	13. Ph.D. Health Services Research	
5. Master of Public Health	14. Ph.D. Psychology	
6. Master of Science in Biostatistics	15. Ph.D. Public Health	
7. Master of Science in Epidemiology	16. Ph.D. Rehabilitation Science	
8. Doctor of Audiology	17. Ph.D. Speech-Language Pathology	
9. Doctor of Physical Therapy		

I certify that the information given on this application is correct to the best of my knowledge. I give permission for my scholarship application materials to be released to and/or reviewed by appropriate donor representatives and the University of Florida Foundation, at the discretion of the College of Public Health and Health Professions.

 Student's Signature

 Date

**Return to: Candice Vogtle
 PHHP Dean's Office
 HPNP Rm 4113
 P.O. Box 100185
 Gainesville, FL 32610**