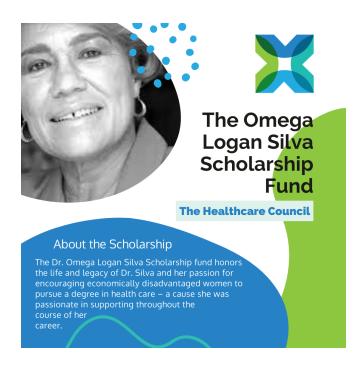
OMEGA LOGAN SILVA SCHOLARSHIP \$5,000 (up to \$20,000 for four years)



Dr. Omega Logan Silva began her graduate medical education in 1967 with the first group of interns in internal medicine at the Department of Veterans Affairs Medical Center in D.C. She became a Fellow in Endocrinology in 1970 and started a research career in the VA's laboratory as the first African American woman Research Associate in the Department, advancing to also become the first African American Clinical Investigator doing work on the hormone calcitonin. Dr. Silva and her collaborators were the first to

describe the production of calcitonin from small cell carcinoma of the lung in humans in 1974 published in the New England Journal of Medicine. As the Assistant Chief of Endocrinology, she ran the Diabetic Clinic from 1977-1996. She was professor of Oncology at Howard University College of Medicine as well as a Professor Emeritus of Medicine at George Washington University. Prior to her death in 2020 she served The Healthcare Council Board for over fifteen years. The scholarship honors her life and her legacy in health care. Throughout her career she was passionate in supporting economically disadvantaged women interested in pursuing a career in healthcare.

ELIGIBILITY

- A candidate for graduation from an accredited high school or a student already pursuing a degree in higher education, vocational or graduate school.
- The candidate must be from or attending a school in the Mid-Atlantic with plans to pursue a position in the same region upon completion of program.
- Candidate must be planning to attend or already attending a post-secondary institution which can include vocational training from an accredited institution.
- Fit category of economically disadvantaged woman.

CRITERIA

- Solid academic achievement.
- Maintain a minimum 3.0 GPA at accredited institution.
- Maintain satisfactory performance at vocational school.
- Significant involvement in school and community activities.

PROCEDURE

- Attached application with all sections completed must be submitted to The Healthcare Council by Thursday, February 1, 2024.
- Two letters of recommendation (from non-relatives) must be submitted to The Healthcare Council by **Thursday**, **February 1**, **2024**. The letter must speak to the character, integrity, and uniqueness of the applicant. (Reference letters from your Guidance Department or school advisor file are not acceptable).
- All questions must be answered completely.
- Include a copy of high school transcript and Activity Sheet or transcript showing college courses or vocational certifications. The Activity Sheet should reflect school and community activities, as well as any awards and recognition you have received in these activities.
- Finalists will be interviewed by the selection committee in early March 2024.
- Scholarship will be presented at The Healthcare Council's Employee of the Year and McNulty Award Ceremony on Thursday, March 14, 2024, at Congressional Country Club in Bethesda, Maryland.
- The recipient of the scholarship will have her essay printed in the ceremony program.

EDUCATION POSTPONEMENT

If the scholarship award recipient chooses to postpone her college/vocational education, the scholarship may be reserved for up to one year from the date of graduation.

OMEGA LOGAN SILVA SCHOLARSHIP FUND SCHOLARSHIP APPLICATION

Due: Thursday, February 1, 2024

Completed application should be sent to: The Healthcare Council 4061 Powder Mill Road, Suite 100, Calverton, MD 20705 or scanned and emailed to thehealthcarecouncil@healthcare-council.org.

Name:
Home:
Address:
Telephone:
Number:
E-Mail Address:
Parents/Guardians: (Full names):
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Please answer the following on a separate paper with your name on top.

- 1. Write a brief essay of 250 to 500 words on how a degree in healthcare will make a difference in your life.
- 2. Answer all the questions at the end of this application.
- 3. Select one activity from your Activity Sheet that is important to you and explain why.
- 4. Describe any job experience(s) you have had.

CERTIFICATION

Applicant:					
I certify that all the statement made in this form are true, complete and correct to the best of my knowledge and believe and are made in good faith.					
Print Name	Signature	Date			
School Counselor or Advisor: I have reviewed the applicant's responses and certify that they are correct,					
according to the office		they are correct,			
Print Name	Signature	Date			

Omega Logan Silva Scholarship Recommendation Form

(Please print clearly or type)

Two (2) recommendation forms are required from (2) different individuals (faculty members or professional contacts):

 Students complete top portion and recommenders complete bottom portion of form.

For all applicants: It is mandatory that this form be completed and returned with an attached (signed and dated) letter that answers the questions below on your behalf.

TO BE COMPLETED BY THE STUDENT:

State your level of education when applying: (Please choose one)
Entering Freshman (First-Year) Student Transfer from another academic institution or accredited vocational program Continuing (Current) Student
Name of Student:
Primary Phone Number:
Alternative Phone Number:
Please choose one of the Following:
I waive my right to read this letter of recommendation
I do not waive my right to read this letter of recommendation.
Name of Recommender:
Title:
Name of School:
Mailing Address of School:
Email: Phone Number:

TO BE COMPLETED BY THE RECOMMENDER: This individual is applying for the Omega Logan Silva Scholarship. Your comments will be an important part of the selection process. Keep in mind that the applicant cannot be considered for a scholarship award until your recommendation is on file (Recommenders can answer questions on a separate sheet, if preferred, and email responses to thehealthcarecouncil@healthcare-council.org):

	How long and in what capacity have you known the applicant?			
	Be as specific as possible about the applicant's academic performance potential that qualifies the applicant for the scholarship.	or other		
	If appropriate, please mention the applicant's motivation and initiative complete and carry through projects and goals:	; ability to		
If you would like to write a letter on behalf of the applicant, please write on official letterhead from the high school, college, or vocational school and attach the written letter signed and dated with this form in a sealed envelope, signed across the seal, to the student or to The Healthcare Council Office by mail before the deadline, or scanned and emailed to: thehealthcarecouncil@healthcarecouncil@healthcarecouncil@healthcarecouncil.org with subject header "Omega Logan Silva Scholarship Committee." Address: The Healthcare Council 4061 Powder Mill Road, Suite 100, Calverton, MD 20705 Attn: Omega Logan Silva Scholarship Committee				
Re	ecommender Signature	Date		

OMEGA LOGAN SILVA SCHOLARSHIP APPLICANT INFORMATION

- 1. List high school or college activities (student government, sports, publications, school-sponsored community service programs, student-faculty committees, etc.).
- 2. List public service and community activities (homeless services environmental protection/conservation, work with religious organizations, etc.) Do not repeat items listed previously.
- 3. List government activities (internships with government agencies, military, municipal boards, etc.).
- 4. List part-time and full-time jobs and nongovernment internships during or since high school graduation.
- 5. List awards, scholarships, publications or special recognitions you have received.
- 6. Describe one specific example of your leadership.
- 7. Describe a recent particularly satisfying public service activity.
- 8. Describe the problem or needs of society you want to address when you enter the healthcare field.
- 9. What are the three most significant courses you have taken in preparation for your career?
- 10. Describe the graduate or vocational education program you intend to pursue if you receive a scholarship. 12. What do you hope to do and what position do you hope to have upon completing your studies?
- 11. What do you hope to do and what position do you hope to have five to seven years later?
- 12. What additional personal information do you wish to share with the scholarship committee?