



Doris Garwood Pharmacy Scholarship

The Doris Garwood Pharmacy Scholarship (\$1000) is awarded to a pharmacy student from the Madison, S.D. area (whose hometown/high school is within a 30 mile radius of Madison). The applicant must have completed at least two years of college and be accepted to or enrolled in a pharmacy program.

First Name

Last Name

Email

Home Address

City

State

Zip/Postal Code

School Address

City

State

Zip/Postal Code

Years of College Completed

I am...

Enrolled in a Pharmacy Program

Accepted to a Pharmacy Program

Please list the Pharmacy Program where you are enrolled/accepted and the year you expect to graduate.

Write a short essay (150 - 250 words) regarding your education, plans and career goals. Address how this scholarship would help you achieve your plans and goals. You may use the box below or attach your essay in a separate document.

Please submit form along with your unofficial transcript. Mail: Madison Regional Health Foundation
323 SW 10th St.
Madison, SD 57042

Email: elizabeth.knuths@madisonhospital.com