



Doris Garwood Pharmacy Scholarship

The Doris Garwood Pharmacy Scholarship (\$1000) is awarded to a pharmacy student from the Madison, S.D. area (within a 30 mile radius of Madison). The applicant must have completed at least two years of college and have been 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

Are you...

Enrolled in a Pharmacy Program

Accepted to a Pharmacy Program

Please list the University's Pharmacy Program where you are enrolled or accepted

A short essay (150 - 250 words) that includes information about who you are, your education, your goals and any financial need. You may use the box below or attach your essay in a separate document.

Please submit form along with your unofficial transcript to:

Mail: Madison Regional Health Foundation
323 SW 10th St.
Madison, SD 57042
Email:
scholarship@madisonhospital.com