

## Application Form

### Personal Information

First Name Last Name Suffix

Home Address

City, State, Zip

Telephone E-mail

Number of years participating in the Teen Resource Center  
(please specify if you were a volunteer, intern, patient, etc.)

### Education Information

Name of High School

School Address

City, State, Zip

Telephone Current grade

### Essay Questions

Please submit an essay that responds to the following questions. The essay should not exceed 1000 words. Please include your name on all pages submitted. All essays should be typed in standard 12 point font.

1. Briefly describe the following:
  - a. What community means to you.
  - b. How you have contributed to your community or share an experience of community involvement.
  - c. How you plan to help fulfill the needs of your community after you've completed your education.

### Letter of Recommendation

One letter of recommendation is required from all applicants. Your letter must be from a former or current supervisor or teacher. The letter may be attached to your application package, the recommender can send directly to the scholarship selection committee, or e-mailed to [shmo@cbwchc.org](mailto:shmo@cbwchc.org).

Signature

Date

## The Dr. Thomas Tam Teen Resource Center 2016 Scholarship



125 Walker Street, 2<sup>nd</sup> Floor  
New York, NY 10013  
Phone (212) 226-2044  
Fax (212) 226-2289



CHARLES B. WANG  
COMMUNITY HEALTH CENTER  
王嘉廉社區醫療中心

Chinatown Health Clinic Foundation

# DR. THOMAS TAM TEEN RESOURCE CENTER SCHOLARSHIP

This scholarship was established in 2008 by the Dr. Thomas Tam Memorial Scholarship Foundation in memory of Dr. Thomas Tam, a co-founder of the Charles B. Wang Community Health Center. The purpose of this scholarship is to further the mission of the Teen Resource Center (TRC) by providing financial support to eligible community youth. The scholarship will support the TRC's goal to provide information and support to the Asian American adolescent population through health education, youth program and activities and referrals. Successful scholarship applicants should demonstrate that they are committed to promoting healthy choices and to fulfilling the needs of their community. This can be demonstrated through various leadership roles and service to the community.



Scholarship recipients will receive a one-time scholarship of \$500 for use at accredited universities or colleges within the US. The deadline to apply is February 22<sup>nd</sup>, 2016. The selection committee will select up to four recipients from all applications received.

## ELIGIBILITY

- Seniors anticipating completion of a high school diploma during the academic year in which the application is made
- Seniors planning to pursue a degree at an accredited US post-secondary institution

## SELECTION CRITERIA

Scholarship recipients will be selected based on the following criteria:

- Demonstrated commitment to applicant's community
- Application essay
- Recommendation letter (Mailed or e-mailed with a letterhead and contact information.)
- Special consideration will be given to members of the Teen Resource Center.

Interested in becoming a member of the Teen Resource Center? E-mail [trc@cbwchc.org](mailto:trc@cbwchc.org) or call 212-226-2044 to talk to one of our Teen Health Educators.

## APPLICATION INSTRUCTIONS

To apply, please submit the following materials by February 22<sup>nd</sup>, 2016.

**Applications submitted by email should be sent to [shmo@cbwchc.org](mailto:shmo@cbwchc.org).**  
**Applications submitted by mail should be addressed to:**

TRC Scholarship  
Charles B. Wang Community Health Center  
125 Walker Street, 2<sup>nd</sup> Floor  
New York, NY 10013

- ✓ Completed application form (this document)
- ✓ Completed essay
- ✓ One letter of recommendation (Mailed or e-mailed with a letterhead and contact information)

It is the responsibility of the applicant to make sure that the completed application, including the letter of recommendation, is received by the scholarship committee by the due date. Late applications will not be considered.

For questions about the program, please call the Teen Resource Center at 212-226-2044 or contact us by e-mail at [trc@cbwchc.org](mailto:trc@cbwchc.org).

