Scholarship & Awards Committee of the Connecticut Environmental Health Association

The Connecticut Environmental Health Association (CEHA) is pleased to announce that two scholarships are available to CEHA members and their children/spouses. Applicants must submit following information:

Application for Marvin L. Smith Scholarship and Joe Hock (Yankee Conference) Scholarship (Form #1)

CEHA membership application (applicants for scholarships must be a member)* School transcripts

College Acceptance Letter or Verification of program enrollment from department Chair

1-2 page written essay to include:

Current or past environmental health/public health employment or involvement Volunteer activities (environmental or other)

Career goals

Prior awards or recognitions received

Education major or program

Length of CEHA membership*

Failure to include all of the required information will void the application

*CRITERIA: Applicant must be CEHA member OR a child OR spouse of a current member. Child/spouse must include name and CEHA membership information of sponsor. Field of study must be related to environmental, public health or biological sciences. Graduate, undergraduate or environmental certification programs are eligible for scholarship consideration.

Preference of Award: Undergraduate study with expressed desire to work in CT, preferably in career goal aligned with CEHA mission; First time recipients

PLEASE RETURN ALL APPLICATIONS NO LATER THAN September 1st 2022:

Erica Mikulak, Chair
CEHA Scholarship and Awards Committee
C/O Bristol-Burlington Health District
240 Stafford Avenue
Bristol, CT 06010

Scholarships will be awarded at the annual CEHA meeting in November. Recipients are expected to attend. Please direct all questions via email: ericamikulak@bristolct.gov

Revised 1/18/18 Chair Submittal Change

CONNECTICUT ENVIRONMENTAL HEALTH ASSOCIATION Marvin L. Smith & Joe Hock (Yankee Conference) Scholarship Application

Mailing Address
Home Phone: Work/Cell Phone:
Current CEHA membership status:
☐ Full time Student ☐ Active ☐ Honorary ☐ Retired ☐ Spouse/Child of CEHA member*
*Spouse/Child of (Include: Name of CEHA member, relationship and years of CEHA membership)
☐ Applicant has been a member of the CEHA for years
☐ I am a new member, membership application and fee enclosed
Employment Information:
Current place of employment (if any): Job Title:
College/University Information:
Name of Accredited institution where enrolled:
☐ Enrolled full time ☐ Enrolled part time
Indicate expected degree/major course of study (Ex: BSc in Environmental Health, MPH in Public Health)
Expected date of graduation (Month and Year):

The information submitted on this application is accurate and correct.
Applicant name: Print and Signature Date