DR. PAUL S. RICHARDS SAFE WORKPLACE SCHOLARSHIP

2023-2024 GRADUATE STUDENT APPLICATION

WCF Mutual Insurance Company | 100 West Towne Ridge Parkway | Sandy, Utah 84070

What is the Dr. Paul S. Richards Safe Workplace Scholarship Program?

WCF Insurance is the largest workers' compensation insurance carrier in Utah, insuring approximately 20,000 Utah employers and their employees. In an effort to further serve these employers and employees, WCF Insurance established the Dr. Paul S. Richards Safe Workplace Scholarship. The Scholarship assists graduate-level students studying occupational medicine, safety and ergonomics, industrial hygiene and occupational injury prevention at the University of Utah's Rocky Mountain Center for Occupational and Environmental Health (RMCOEH). WCF Insurance will award individual scholarships valued up to \$5,000 for use at the RMCOEH. Scholarship funds may be used for tuition, fees, and full-time academic expenses. The program is administered by WCF Insurance.

Who can apply?

Entering Students:

To be eligible, an entering student must:

- Meet all admission requirements applicable to the RMCOEH graduate level program for which the student is a candidate.
- Have an overall undergraduate GPA of 3.0 (on a 4.0 scale) or better.
- Provide unofficial transcripts from the U of U and all colleges and universities attended (if you have questions, please see Kat McColl).
- Provide two letters of recommendation (not necessary if you are already in the RMCOEH programs).
- Provide a personal statement, including your short- and long-term OEHS career goals. Specify how the funding would help achieve your goals.
- Demonstrate the potential to excel in graduate-level programs by work/life experiences, etc.
- Complete the Dr. Paul S. Richards Safe Workplace Scholarship application form.

Continuing Students:

For students currently admitted to the RMCOEH graduate level program, no letters of recommendation are required. All other requirements as listed above for an entering student must be met.

How are the Safe Workplace Scholarship recipients selected?

Selection criteria include:

- Past academic performance;
- Professional, work or personal experience; and
- Potential to complete your academic program at the RMCOEH and contribute to worker health and safety.

Selections will be made by a panel chosen by WCF Insurance.

What obligations are associated with the program?

Students receiving this scholarship will be required to maintain at least a 3.0 GPA or better in their selected field of study. An internship or medical rotation with the WCF Insurance may be required of scholarship recipients in order to maintain continued eligibility.

How to apply

Interested individuals should complete a Dr. Paul S. Richards Safe Workplace Scholarship Application. The completed application, transcripts and letters of recommendation should be submitted to WCF Insurance. If you have questions, please contact Steffanie Campasano at 801-520-4879 or scholarship@wcf.com.

Completed application forms, transcripts and letters of recommendation must be received at WCF Insurance, 100 West Towne Ridge Parkway, Sandy, Utah 84070, *Attention Angie Holt – Safety Dept*. by *March 31, 2023.* The applicant is solely responsible to assure all materials are received at WCF Insurance's office by the deadline.

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INSTRUCTIONS

All blanks must be completed. If answer is "none" or "does not apply", so indicate. To be valid, this form must be signed. Completed applications as well as transcripts and letters of recommendation must be received in the office of WCF Insurance by *MARCH 31*, 2023.

| Personal information | | | | | | | |
|--|-----------------------------|------------------|--|-----------------|-------------------|---|--|
| Name (Last, First, Middle) | | | | | | | |
| Street address | | | City | | State | Zip | |
| Gender Date of birth | | Date of birth | _ 1 | | Citizenship | | |
| ☐ Male ☐ I | Female | | T | | | | |
| Home phone number | ne number Cell phone number | | | Email address | | | |
| | | | 1 | | | | |
| Education | | | | | | | |
| College or University | | | | Graduation date | | | |
| Undergraduate degree (Type of degree received and location) | | | Graduate degree (Type of degree received and location) | | | | |
| Planned graduate program (Please explain and describe MD, PhD, MSO | | | l H, MA, etc.) | | Area of emphasis | | |
| | ty of Utah for this n | | | | | through RMCOEH) whil place Scholarship award: | |
| | | | | | | | |
| | | | | | | upational medicine, safe d help achieve your goals | |
| Would you be available | for a six-week inte | rnship or a four | -week occupatior | nal medicine | rotation at WCF I | Insurance this summer? | |
| Yes No | If yes, when mig | ht you be availa | ble? | | | | |
| | | | _ A | pplicant's prin | ted name | | |
| Date | | | | | | | |
| | | | | | | | |