



MASSACHUSETTS ENVIRONMENTAL HEALTH ASSOCIATION

Alan Perry Scholarship Application

Section 1: Personal Information

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Section 2: Employer Information

Current Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Section 3: Scholarship Details

Preference will be given to new environmental health agents with less than two years of experience. Applicants must submit a resume and letter of interest detailing how they define environmental health.

- ☐ Resume attached
- ☐ Letter of Interest attached
- ☐ Have you applied for this scholarship before? (Circle one): Yes / No