



Malcolm P. Adcock Scholarship

Malcolm Adcock was Cincinnati health commissioner for 11 years. He was known for his dedication to improving health care services for the low-income residents of Cincinnati. His proudest achievement was keeping medical services intact at the city's six health clinics, located in low-income communities, despite Cincinnati's budget crisis. He served on the Community Advisory Board of Hoxworth Blood Center for more than 15 years and was Board Chair from 1999 to 2003.

This scholarship may be for you if you...

- Are a minority senior
- Have a minimum GPA of 2.5
- Are active in your school and community
- Submit a :30 video promoting blood donation. This video does not need to be of professional quality and can even be shot on your cell phone.

We are excited to view your creative submissions on how to encourage others in the community to become regular blood donors.

Scholarship amount: Apple iPad & \$250 cash (non-renewable)

Application due date: Last Friday in March

Visit us at www.hoxworth.org/highschool to download the application.

REQUIREMENTS TO DONATE: Bring photo ID, 110+ pounds, good meal and fluids, 17+ years old (16 with consent)
16-18 YEAR OLDS MUST COMPLY WITH THE ELIGIBILITY REQUIREMENT CHART





Malcolm P. Adcock Scholarship Application

First Name *Middle Initial* *Last Name*

Date of Birth *Email Address* *Phone Number*

Address *City* *State* *ZIP*

High School *Date of Graduation*

Cumulative GPA on an unweighted scale for grades 9 - 12

Name of College/University

Name of Parents or Guardian

Please answer the following questions on a separate piece of paper.

1. Please attach high school transcript(s).
2. List community service activities.
3. List school related activities.
4. Please submit a :30 video promoting blood donation within minority communities. Video can be sent electronically to donateblood@uc.edu. This video does not need to be of professional grade quality and can even be shot on your cell phone.

I hereby certify that all the information contained within, and attached to this application is, to my knowledge, accurate. I understand that, if awarded a scholarship under this program, I will enroll in classes at an accredited post-secondary educational institution within six months of high school graduation, or forfeit the monies in the award.

Applicant Signature *Date*

Applications must be postmarked no later than close of business. Friday, March 30, 2018.

Attn: MALCOLM P. ADCOCK MEMORIAL SCHOLARSHIP
Donor Recruitment & Development
Hoxworth Blood Center
University of Cincinnati Academic Health Center
3130 Highland Ave. PO Box 67005
Cincinnati, OH 45267-0055

Revised 9/2017