Texas Medical Association Foundation

Hispanic Medical Student Scholarship Trust Fund

of Dr. Roberto J. and Agniela (Annie) M. Bayardo

Offers a onetime scholarship of \$5000

Scholarship Requirements:

- Must Identify as Hispanic
- Have been accepted to or are attending a Texas medical school
- With the completed application form you will need to include a
 written essay, of no more than 500 words (double-spaced, 12
 point type), addressing the role of the physician as a doctor,
 family member, and community member.
- Application deadline is July 30, 2021.
- For a fillable application form, email tcms@tcms.com.



Scholarship funds made possible by a grant from the Texas Medical Association Foundation

The Travis County Medical Society Foundation Scholarship Application

Application Deadline: July 30, 2021					Date:	
Name:(last)		(first)		(mi	ddle or maiden)	
Permanent Mailing Add	ress.					
Permanent Mailing Add	(street)	(city)	(sta	te) (zip))	
E-mail:	Mobile:					
High School Attended:						
	(name of school, city	y, state)	(year graduated)	(cla	ass rank)	
Colleges Attended:	(name of school cit	u stato)	(dates attended)		(GPA)	
	(Harrie or School, Cit	y, state)	(dates attended)	(major)	(01 A)	
Honors, activities, com	munity service (high s	chool and college	e) Attach additional pag	es, if needed:		
-			4.5		(Carrel	
Medical school you are	attending:					
Gross family income in 2020: Will you be applying for additional financial aid?						
Are you available for a	personal interview?		Market Committee			
Essay: Attach a writter				ype), addressin	g the role of the	
physician as a doctor, f	amily member, and c	ommunity membe	er.			
Signature:			Printed Name:			
olgilature.	Ŧ		Fillited Name:			
Do you self-identify as heritage, nationality, lin United States)? People	eage, or country of b	irth of the person	or the person's parents	or ancestors be		
☐Yes ☐No						

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Mail completed application and essay to: