

**CPH Board of Advisors Student Award  
2019 Application Cover Form**

Applicant's Name: \_\_\_\_\_

Degree Program (check one):    BA    BS    MPH    MHA    MS    PhD

Department (select one):

Expected Graduation Date: \_\_\_\_\_    UI Cumulative GPA: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_

DEO's/Program Director's Signature: \_\_\_\_\_

*NOTE: Please include a letter of support with your application.*

Other Education:

Extracurricular Activities/Professional Experience (including volunteer and community work):

**CPH Board of Advisors Student Award**  
**2019 Essay**  
(300-500 words, single spaced, 12 point font)