

St. LUKE'S CORNWALL HEALTH SYSTEM FOUNDATION

A Member of the **Montefiore**
HEALTH SYSTEM, INC.

Michael L. Pappis, M.D. 2023 Memorial Scholarship

We are pleased to make this scholarship possible through the generosity of the family and friends of Michael L. Pappis, M.D.

Purpose:

To provide financial assistance to (1) graduating high school student planning to pursue a career in the medical field.

Amount of Scholarship:

(1) \$1,500 scholarship

Eligibility Requirements:

- Candidate must plan to pursue a career in the medical field.
- Proven acceptance, by the date of this application, to a two or four-year college.
- Proven academic achievement with a grade point average of 85 or better.
- Documentation of at least an 1100 SAT score or 24 ACT composite score.
- Active participation in a community service program/project and extra-curricular programs.
- Completed application submitted by the deadline.

Application Materials:

- Application filled out completely (*incomplete application will not be considered*)
- Essay, no more than 500 words explaining why you wish to pursue a career in the medical field
- Two (2) letters of recommendation (excluding family members)
- Completed Guidance Counselor form
- High School transcript verifying GPA of 85 or better
- Proof of SAT/ACT scores
- Proof of college acceptance, to include college student account number.

All application materials must be submitted or post-marked by April 28, 2023.

Please send to:

St. Luke's Cornwall Health System Foundation
70 Dubois Street, 3rd Floor, Newburgh, NY 12550
Or email: Foundation@montefioreslc.org

For further information, please contact St. Luke's Cornwall Health System Foundation at (845) 568-2580 or Foundation@montefioreslc.org.

St. LUKE'S CORNWALL HEALTH SYSTEM FOUNDATION

A Member of the **Montefiore**
HEALTH SYSTEM, INC.

Michael L. Pappis, M.D. 2023 Memorial Scholarship

In February 1996, St. Luke's Hospital and The Cornwall Hospital lost a valued member of their medical staffs when Dr. Michael Lukas Pappis, M.D., F.A.C.S. died unexpectedly. Dr. Pappis, a long-time area resident and medical practitioner was appointed to the medical staff of St. Luke's Hospital in 1981 as a general and vascular surgeon. He completed his undergraduate studies at Columbia University and graduated from the Upstate Medical Center in 1973. From 1973 through 1977, Dr. Pappis completed his internship and first residency in surgery at New York University-Bellevue Hospital. He completed his second residency in vascular surgery at New York Medical College in Valhalla in 1981. Dr. Pappis was a Diplomat of the American Board of Surgery. He was an attending surgeon at both St. Luke's Hospital and The Cornwall Hospital, as well as an assistant professor and attending surgeon at New York Medical College, Westchester County Medical Center, and Valhalla.

Dr. Pappis was deeply involved in the delivery of quality medical care to the greater Newburgh community. He was also very interested in the development of young talent for the medical professions. The medical staffs of St. Luke's Hospital and The Cornwall Hospital and the Pappis Family established a lasting memorial tribute to Dr. Pappis through the creation of a scholarship fund. The fund will help support the higher education of a local student who is interested in pursuing a career in medicine.

St. LUKE'S CORNWALL HEALTH SYSTEM FOUNDATION

A Member of the **Montefiore**
HEALTH SYSTEM, INC.

Michael L. Pappis, M.D. 2023 Memorial Scholarship STUDENT APPLICATION FORM

(To be completed by student – please print clearly or type)

1. PERSONAL INFORMATION:

- A. Name (Last, First, Middle) _____
- B. Address _____
- C. Telephone _____
- D. E-mail Address _____
- E. Date of Birth _____
- F. Mother's Name _____
Occupation _____
- G. Father's Name _____
Occupation _____
- H. Guardian's Name _____

2. SCHOOL INFORMATION:

- A. Name of High School _____
- B. Name of Principal _____
- C. Telephone Number _____
- D. Address _____
- E. Anticipated Date of Graduation _____

3. CAREER PLANS:

- A. Name of college/trade school you plan to attend _____
- B. Address _____
- C. Have you been accepted? _____
- D. Why have you chosen this college/trade school? _____

- E. What health career do you plan to follow? _____

- F. What are your plans for achieving your career goal? _____

4. ACTIVITIES:

- A. Have you been active as a hospital volunteer? _____
 - 1. Location (Newburgh, Cornwall or Offsite) _____
 - 2. Department(s) where you volunteered _____

St. LUKE'S CORNWALL HEALTH SYSTEM FOUNDATION

A Member of the **Montefiore**
HEALTH SYSTEM, INC.

B. Briefly describe your experience(s) in your community or school – be specific about the positions held, your responsibilities and what you learned. _____

C. Have you been employed during the last two years? _____
If yes, name of employer(s), position and length of time _____

D. Briefly describe your other extracurricular activities during the past two years. _____

5. ESSAY:

Please attach an essay no more than 500 words double-spaced typed pages, explaining why you are pursuing a career in the medical field. Give any information that will aid the selection committee in evaluating your application. Content, grammar, and spelling will all weigh heavily on your selection.

6. RECOMMENDATIONS:

Please submit two (2) letters of recommendation with the application form. Letters may be submitted from your teachers, principal, clergy, employers, etc. **(letters from relatives are not acceptable).**

7. GUIDANCE COUNSELOR FORM:

Please have your guidance counselor fill out the Guidance Counselor Application form and return all of the above to the St. Luke's Cornwall Health System Foundation Office.

Please return this form by April 28, 2023 to:

St. Luke's Cornwall Health System Foundation
70 Dubois Street, Newburgh, NY 12550
or email to: Foundation@montefioreslc.org

TO BE COMPLETED BY HIGH SCHOOL GUIDANCE COUNSELOR

1. Name of Applicant _____

2. Candidate entered _____ in _____ and will graduate on _____

3. Describe courses pursued by applicant at your school _____

4. Leadership Influence:

- _____ Strong
- _____ Average
- _____ Weak
- _____ Negligible

8. Personality:

- _____ Exceptional
- _____ Pleasing
- _____ Neutral
- _____ Displeasing

5. Personal Responsibility:

- _____ Accepts fully
- _____ Partially accepts
- _____ Sometimes refuses
- _____ Usually refuses

9. Contribution to School Life:

- _____ Exceptional
- _____ Above average
- _____ Average
- _____ Negligible

6. Personal Initiative:

- _____ Self-starter
- _____ Responds to prodding
- _____ Needs to be pushed
- _____ Negligible

10. Academic Promise:

- _____ Excellent
- _____ Average
- _____ Fair
- _____ Poor

7. Maturity:

- _____ Superior
- _____ Good
- _____ Average
- _____ Immature

11. Describe applicant's major strengths and weaknesses _____

12. SAT or ACT Score(s) _____ Class rank if available _____

Counselor's printed name & title _____

School address _____ Counselor's email _____

Signature _____ Date _____