

JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH
Financial Aid Office
2024-2025 BALTIMORE PUBLIC HEALTH SCHOLARSHIP

Please print the following:

Student Name: _____ Degree Program: _____

Department Name: _____ Date of Transcript Request: _____

Name of High School: _____

Part 1 Eligibility:

Am I eligible?

The school provides limited need-based scholarships to eligible first-year, full-time master's students who have graduated from a Baltimore City High School and demonstrate high levels of financial need.

Part 2 Essay:

To support your application for the Baltimore Public Health Scholarship: 1) attach your response to the following questions in a minimum of 200, a maximum of 400 words for each; 2) request your high school transcript to be sent to us directly from the school.

- 1) Tell us about your interest in public health.
- 2) Please tell us about your public health-related experience including work and volunteer activities.
- 3) Please provide details on your involvement in any Baltimore City activities.
- 4) Upon completion of your degree, what impact would you like to have on the public's health?

Part 3 Financials:

1. Complete the 2024-2025 [Free Application for Federal Student Aid \(FAFSA\)](#). Be sure to enter the Johns Hopkins Bloomberg School of Public Health - Code E00234 so that we receive your FAFSA data.
2. Complete chart below:

Assets: (As of the date of your FAFSA Filing)	Student and Spouse	Untaxed Income: (Not reported on FAFSA)	Student and Spouse
Value of savings and checking		2022 Payments to tax-deferred pensions and retirement savings plans	
Investment Value – include stocks, bonds, trust funds, real estate		2022 Child support received	
Business Net Worth		2022 Money received or paid on your behalf (e.g., bills, food, housing, cash)	

Applicants born on/after January 1, 2000, must provide parental data below to be considered for the Baltimore Public Health Scholarship

Applications from students required but who fail to provide parental data will be considered incomplete.

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Part 4 Parent Data (please print):

Parent Name: _____

1. Parent 2022 Federal Adjusted Gross Income

(include wages, business income, taxable interest/dividends, capital gains, etc)

2. Income Earned from Work

3. Parent 2022 Federal Income Tax Paid

4. Parent 2022 Untaxed Income

(Include payments to tax-deferred pensions, IRA deduction and payments to qualified self-employed plans, child support received, tax-exempt interest, untaxed portions of IRA deductions and pensions, housing, food, and other living allowances including cash received or paid on your behalf.)

5. Parent Assets

(include checking/savings, investments, stocks, bonds, trust funds., rental/vacation property, etc. as of today)

6. Business Net Worth (if applicable)

7. Total Number Living in the Household

(include parents, the student, and other dependents)

8. Number of Family Members who will enroll in college in 2024-2025

(include the student and siblings, exclude parents)

Applications from students required but who fail to provide parental data will be considered incomplete.

I certify that the information provided on this form is true and accurate. I understand that any misrepresentation may be the cause for denial or revocation of a scholarship award.

Johns Hopkins University does not discriminate based on race, color, gender, religion, age, sexual orientation, national or ethnic origin, disability, marital status or veteran status in any student program or activity administered by the University or concerning admission or employment. Questions regarding Title VI, Title IX, and Section 504 should be referred to the Office of Institutional Equity, Garland Hall 130, Telephone: 410-516-8075, (TTY): 410-516-6225.

Student Signature:

Date:

Parent Signature:

Date: