



Dr. U. R. Plante Medical Scholarship Reference Letter Instructions

Sir/Madam:

You were listed as a reference for a medical student applying for the Dr. U. R. Plante Medical Scholarship at the Adirondack Community Foundation. Scholarship recipients will be awarded up to \$10,000 to put toward costs of attending medical school. Each recipient must comply with the following:

1. Must be a resident of either the Adirondack Park, St. Lawrence, Essex, Franklin, Hamilton, or Clinton County of New York State or have lived in one of these counties for at least two years.
2. Must be enrolled in, or accepted by an accredited Medical School MD or DO program in either the United States or Canada.
3. Must be willing to return to one of the above locations to practice for at least two years; or plan to practice for two years in a remote part of the U.S. or another country where doctors are needed.

As the applicant's reference, please respond to the following questions:

1. How are you acquainted with, and how long have you known the applicant?
2. Describe any applicant experiences that you believe relate well to the Dr. U.R. Plante Scholarship objectives.
3. Why do you think this person would be a good doctor?
4. Has the applicant indicated where they hope to practice?
5. Is this student facing an unusual unmet financial need that you are aware of and can share?
6. Please share additional information and perspective that you believe will help the committee better evaluate this candidate's suitability for scholarship support.

Your letter is to be uploaded to the student's application via the emailed link before May 15th. Please include your telephone number and email address in case the scholarship committee would like to follow-up with additional questions.

Sincerely,

Leslee Mounger
Funds & Program Officer
Adirondack Community Foundation
518-523-9904
leslee@adkcommunityfoundation.org