

**Lyle L. Baker Memorial Scholarship**

The North Carolina Society of Histotechnology (NCSH) established a Memorial Scholarship to honor the life of one of our most beloved and dedicated fellow histologist… Mr. Lyle Baker. The scholarship will be presented annually at the North Carolina Society of Histotechnology Spring Meeting. The scholarship is sponsored by\_**Avantik**\_**.** A $500.00 monetary award will be presented on a reimbursement basis.

The scholarship is to be used for educational purposes: Meeting registration fees, hotel, travel, NSH on-line education offerings (webinars, Live Learning Center) or other educational materials, etc. Receipts must be sent to the NCSH Treasurer. Funds not used within the two year period will revert to scholarship fund.

This Award will be presented to the recipient that, in the opinion of the Awards Committee, embodies the qualities of dedication and devotion to the profession of Histotechnology, and wishes to further their histology knowledge through educational offerings. Selection of the recipient for this award will be made by the Awards Committee.

**DEADLINE: postmarked or emailed by, Friday, February 14, 2025.**

Scholarship Criteria

Current Member of NCSH.

If Not already a member of the National Society for Histotechnology, funds will automatically be deducted for membership.

Applicants must submit the following to the Awards Committee:

1. Confidential written evaluation/recommendation of the applicant/nominee by his/her employer, instructor, supervisor, and/or pathologist or director attesting to financial need, service and dedication to the field of Histotechnology.
2. Personal Statement to include Plans of Utilization of the scholarship is to be submitted by the applicant. These plans must be completed within two years after the scholarship is awarded.
3. Permanent address where the reimbursements may be mailed.
4. Preference will be given to those individuals who are currently studying for their HT or HTL exam or recently acquired their HT or HTL certification.

**Lyle L. Baker Memorial Scholarship**

The Awards Committee will consider the application only after all supporting documents are received.

Nominee

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer / School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Individual Nominating Candidate

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidates Personal Statement: *(Type / Print out and attach to application, 500 words or less)*

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**Mail completed application to:**

*Awards Committee c/o Cathy Mathis*

*193 Kings Lane*

*Winston-Salem, NC 27107*

**Or e-mail to:** *cmmathis@wakehealth.edu*