

**Lawrence J. Durante  
Scholarship Fund**

Griffin M. Bates, Jr., M.D.  
Charles B. Brill, M.D.  
Stanley Cohen, M.D.  
Peter E. Dans, M.D.  
William H. Dantzler, M.D.  
Gerald S. Golden, M.D.

Frederick M. Grossman, M.D.  
Blanche Y. Liu, M.D.  
Thomas M. Mack, M.D.  
Ronald M. Maenza, M.D.  
Arthur T. Meyerson, M.D.  
Benjamin A. Nachamie, M.D.  
John F. Ryan, M.D.

M. Leon Skolnick M.D.  
Susan J. Standfast, M.D.  
Eleanor M. Townsend, M.D.  
Richard Thurer, M.D.  
Alan Wanderer, M.D.  
Robert J. Welch, M.D.

February 23, 2009

Dear Second and Third Year Students:

On behalf of the Durante Scholarship Fund Committee, I am writing to inform you of the call for applications for the Lawrence J. Durante Scholarship which has been given annually since 1976.

Dr. Durante, an outstanding member of the Class of 1961, died of lymphoma in 1963 as he was about to begin a residency in Urology at P&S. He was one of the most cheerful, ebullient and optimistic individuals we have ever had the pleasure of knowing. Besides being a hardworking and dedicated student, he excelled in a wide variety of extracurricular pursuits. These included sports (sufficient to earn a try-out for the New York Yankees), singing, (especially opera), and travel. During his fourth year, he participated in an elective working with a surgeon in Liberia. His vitality and spirit are commemorated in this scholarship.

Because of the generosity of donors over the years, \$70,000 was distributed during the 2008-09 academic year. A similar amount will be available for 2009-10 to fund Durante Scholars from the third and fourth year classes. This year we have five Durante Scholars, from the third and fourth-year classes. Candidates are asked to submit an application; a **one page** essay indicating their current career goals; outside interests; personality traits; a **one page** résumé; a faculty recommendation; and an academic transcript. Financial need will also be taken into consideration.

If you wish to apply for this award, please complete the attached Lawrence J. Durante Scholarship application, or pick one up in the Office of Student Financial Planning, BB - 139. Your application with all supporting documentation should be submitted no later than **March 31, 2009** to Ideta Daniel in the Office of Student Financial Planning. The Committee will evaluate applications and select finalists for interviews during the month of May.

Best wishes.

Sincerely,

Peter E. Dans, M.D.  
Chairman  
Durante Scholarship Fund Committee

**APPLICATION TO THE DURANTE SCHOLARSHIP FUND**  
(please print)

**2009-10**

1. Name in full \_\_\_\_\_  
Last
First
M.I.

2. Local address \_\_\_\_\_

3. Permanent address \_\_\_\_\_

4. Date of Birth \_\_\_\_\_

5. Do you have a spouse or domestic partner? Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Name and age of dependents:

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

6. Expected date of medical school graduation \_\_\_\_\_

7. Proposed Budget and Resources for 2009-10 Academic year: (Complete this section in full.)

**Estimated Costs**

**Estimated Resources**

Tuition and Fees \$ \_\_\_\_\_

Savings \$ \_\_\_\_\_

Books and supplies \$ \_\_\_\_\_

Work \$ \_\_\_\_\_

Room \$ \_\_\_\_\_

Parents \$ \_\_\_\_\_

(Dormitory \_\_\_\_ Other \_\_\_\_ )

Sub. Stafford Loan \$ \_\_\_\_\_

Board \$ \_\_\_\_\_

Unsub. Stafford \$ \_\_\_\_\_

Travel \$ \_\_\_\_\_

P&S Grant(s) \$ \_\_\_\_\_

Personal \$ \_\_\_\_\_

P&S Loan(s) \$ \_\_\_\_\_

Other (identify) \$ \_\_\_\_\_

Other (list sources) \$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

8. List below your total outstanding educational loans:

**Source**

**Prior to P&S**

**At P&S**

Federal Subsidized Stafford Loan \$ \_\_\_\_\_

\$ \_\_\_\_\_

Federal Unsubsidized Stafford Loan \$ \_\_\_\_\_

\$ \_\_\_\_\_

Federal Perkins Loan \$ \_\_\_\_\_

\$ \_\_\_\_\_

Medical School Loans (identify):

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Other (identify):

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

TOTAL OUTSTANDING EDUCATIONAL LOANS: \$ \_\_\_\_\_

9. Please indicate scholarships and financial assistance, other than loans, received during your educational undergraduate and/or graduate career. (Attach sheet if more space is needed.)

Year	Source	Amount	Duration
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

10. THIS APPLICATION SHOULD BE ACCOMPANIED BY THE FOLLOWING:

- ✓ One page (single spaced, 12 point font) statement reflecting your career objectives, interests, and unique characteristics that qualify you for the Durante Scholarship. Please resist the urge to cram more in about yourself, by using small type or more pages
- ✓ One page Resumé
- ✓ One letter of recommendation from a teacher at P&S
- ✓ A current medical school transcript

*I declare that the information reported on this form is true and complete to the best of my knowledge and that I will notify the Durante Scholarship Committee of any changes that would affect the determination of need.*

*I certify that I will use any assistance granted me for the purpose of financing my medical school education.*

Date \_\_\_\_\_ Signature of Student \_\_\_\_\_

Social Security Number \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

***The deadline for receipt of all application materials is March 31, 2009***