

## Drs. Richard and Philip Messina Award for Excellence in Global Initiatives

**Deadline Date: February 1, 201** 

Today's Date:	
Name:	Student ID#:
Email Address:	Phone Number:
Address:	
City:	State:
The Drs. Richard and Philip Messina A	ward for Excellence in Global Initiatives is pleased to
offer scholarships to Stony Brook Scho	ol of Medicine student/students and a Stony Brook
Medicine Ophthalmology resident annu	ally to assist in offsetting the costs of the travel
expenses of participating in a mission o	organized by A Promise to Peru, Inc.
Please list the name of the country to w	hich you will be traveling:
Please list the dates you will be travelin	g:
Reason you are interested in participating	ng in the mission:
Medical expertise that you hope to prov	vide:
Your professional goals for participatin	g in this mission:
Your personal goals for participating in	the mission:
Your approximate expenditures for this	trip:
Please write a 250 word essay as to why application):	y you should receive this stipend (attach with your



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Deadline Date: February 1, 2024

	I am a student in good standing
	I agree to purchase evacuation insurance.
	I will submit an elective evaluation form on my return.
	All of the information in this application is true to the best of my knowledge.
Sig	gnature: Date:
	inature.
	matureDate.
	Date:
	ase email the completed application to <a href="mailto:Laurel.Loh@stonybrookmedicine.edu">Laurel.Loh@stonybrookmedicine.edu</a> or fax the olication to: (631) 444-9376
app Ple Re	ase email the completed application to <b>Laurel.Loh@stonybrookmedicine.edu</b> or fax the
app Ple Re	ase email the completed application to <a href="Laurel.Loh@stonybrookmedicine.edu">Laurel.Loh@stonybrookmedicine.edu</a> or fax the olication to: (631) 444-9376  ase note that the funds awarded will be distributed on return from the medical mission ceipts for travel will need to be submitted to Laurel Loh before the award can be
app Ple Re	ase email the completed application to <a href="Laurel.Loh@stonybrookmedicine.edu">Laurel.Loh@stonybrookmedicine.edu</a> or fax the olication to: (631) 444-9376  ase note that the funds awarded will be distributed on return from the medical mission ceipts for travel will need to be submitted to Laurel Loh before the award can be