# Harvard Medical School Primary Care Loan Forgiveness Program Description

The Harvard Medical School Financial Aid Office is pleased to announce a new debt-relief scholarship program targeted to graduating HMS students. This program is designed to reduce educational debt through loan forgiveness for students who will be joining a residency program in primary care. The program was established by Edward M. Scolnick, AB '61, MD '65. The HMS Primary Care Loan Forgiveness Fund is designed to relieve the loan obligation of selected graduating students of Harvard Medical School who meet the criteria listed below.

Eligibility for this program will include the following:

- Graduating student matching in a residency program in primary care
- Demonstrated academic excellence and commitment to the field of pimary care

Note: All students meeting the criteria of public service above with educational debt in excess of \$50,000 are encouraged to apply. Priority will be given to students who have accumulated educational debt in excess of \$100,000.

\*Applicants should explain their definition of primary care in the Statement of Purpose, detailing how their past activities and future plans meet this definition of primary care:

HMS students will apply to this program in their graduating year. The application process includes a one-page Statement of Purpose, providing citations of the student's prior commitment to primary care, an explanation regarding how the student's intended residency program further enhances this pursuit, and a detailed description of the student's intended career path in primary care. Three letters of recommendation, one being the academic Dean's Letter and two one page-letters being from people knowledgeable about the student's primary care work, are required. An official HMS transcript and the student's Curriculum Vitae are also required.

Selection of recipients will be based upon a combination of factors, including the students' letters of recommendation and demonstrated commitment to primary care. Financial need is a significant factor in the selection process. Recipients are determined once confirmation is received regarding a student's match in a residency program.

One student will receive an award of \$50,000 in the form of loan forgiveness. The remaining award amounts will vary depending on the recipient's total HMS educational debt. Amounts will depend upon number of recipients selected.

A condition of this award will include an update to the HMS Financial Aid Office upon completion of one's residency program detailing the intended career path of the recipient and describing how the Primary Care Loan Forgiveness Program impacted the recipient's pursuit of that career path.

# Harvard Medical School 2024-2025 Primary Care Loan Forgiveness Fund

#### **Eligibility Requirements:**

- Graduating student matching in a residency program in pimary care
- Demonstrated academic excellence and commitment to the field of primary care

### **Statement of Purpose (one-page limit):**

Please define what primary care means to you. Include examples of activities in which you have engaged that show your commitment to this definition. Indicate how your residency program will prepare you for continued pursuit of primary care. Please describe how your career plans demonstrate a commitment to primary care.

Statement of Purpose requirement: 12 point font with 1 inch margins will only be accepted.

#### **Letters of Recommendation:**

Three letters of recommendation are required. Your academic letter should be your official Dean's Letter (send request to the HMS Registrar's Office; do not request from your Society). Two remaining letters should be no more than one page, focus on your primary care activities and be from people who have detailed knowledge of your commitment to primary care. These letters should address how committed you are to a career in primary care, elaborating on your relative experience, creativity, initiative and leadership skills. Recommenders should have detailed knowledge of your future career plans.

Caution: if you are planning to request a recommendation letter from your Society advisor, be sure this person has direct and extensive knowledge of your commitment to primary care.

#### **Curriculum Vitae:**

Please submit Curriculum Vitae with your application. This document should indicate your prior Public Service activities. Please provide a timeline for these activities (start/end period, # of hours pursuing activity per week or month, etc.). CV's without a clear understanding of your time commitments to activities will weaken your application.

## **HMS Transcript:**

Please submit an official HMS transcript with your application.

**Application Deadline:** April 7, 2025

Send all completed application materials to:

Harvard Medical School Financial Aid Office 107 Avenue Louis Pasteur, Ste. 111 Boston, MA 02115 financial aid@hms.harvard.edu

# 2024-2025 HMS Loan Forgiveness Application

Please read the eligibility requirements for the loan forgiveness program(s) to which you are applying. If you are applying to more than one program, please note that only one set of application materials will be accepted:

- -One statement of purpose referencing your interest in both public service and primary care
- -Three letters of recommendation (one being the Dean's Letter)
- -One curriculum vitae (indicating your time commitment to public service/primary care activities)
- -One HMS transcript.

| I am applying for (check all that apply):   |                               |                  |
|---|-------------------------------|------------------|
| Presidential Scholars Public Service Initiative   |                               |                  |
| Primary Care Loan Forgiveness Program   |                               |                  |
| First name  | Last name                     |                  |
| Street address  | Street address line 2         |                  |
| City  | State                         | Zip code         |
| Phone number  | Email                         |                  |
| Society   | Residency Site                |                  |
| Field of Medicine   |                               |                  |
| Do you plan to pursue a specialty during/after residency:   | If yes, in what field:        |                  |
| Yes<br>No   |                               |                  |
| Should I be awarded funding from either the HMS Public Forgiveness Program, I authorize the HMS Financial Aid this/these award(s). I understand that no personal financia announcement. | Office to publicize my name a | s a recipient of |
| Signature   | Date                          |                  |