



Tiana Nicole Williams Memorial Endowment for the Prevention of Domestic Violence

Tiana Nicole Williams was the 73rd member of the Class of 2006. She was killed by her fiancé in a domestic violence dispute one month prior to beginning medical school in 2002. In her honor, the Class of 2006 together with the American Medical Women's Association and the Student National Medical Association established this endowment to fund research and community service projects addressing the issue of domestic violence. The \$25,000 minimum needed to endow this fund was graciously provided by the medical community, community of Greenville and families and friends of the Class of 2006 along with the BSOM Classes of 1996, 1997, 1999, 2000 and 2004.

All full-time M-1, M-2 and M-3 medical students who have completed at least one semester of school and who have not yet begun their final semester are encouraged to apply. Student organizations can also apply. Each project should be at least 200 service hours. Preference will be given to projects that serve this geographical area. A faculty mentor will need to be chosen by the applicant to oversee the project's progress and give guidance. The dollar amount awarded to fund the project fluctuates from year to year depending on stock market conditions but is usually \$1,000 to \$1,500. The recipient must submit a brief report of the project after its completion to the advisory committee by the end of the calendar year of which the money was awarded.

DEADLINE FOR RETURN OF COMPLETED APPLICATIONS:

April 15th, 2022

To be considered, you must return scholarship application by April 15th, 2022, 5:00 to:

Amy Howell, MD, Class of 2006
downeastdiabetology@gmail.com

TNW ENDOWMENT PROJECT APPLICATION

Name: *(First, Middle, Last)* _____

Current Class Year: M-1 _____ M-2 _____ M-3 _____

Local Address _____

City _____ St _____ Zip _____

Phone Number (_____) _____

Email address _____

Faculty Mentor _____

1. What are your current career goals (specialty, location, etc.)?
(Attach separate sheet if necessary)

2. Describe any service-oriented activities that you have participated in during medical school (student organizations, volunteer work, etc.). *(Attach separate sheet if necessary)*

I certify that all information presented in the application is correct to the best of my knowledge. I authorize the Brody School of Medicine or The Medical Foundation of ECU, Inc. to verify any information contained within this application.

Student's Signature

Date