



Dear Applicant,

The Founders Medical Scholarship was established to honor Brian and Rhonda McDonald, founders of the Hemophilia Foundation of Greater Florida, now known as the Bleeding Disorders Foundation of Florida. For over 35 years they have worked to improve the quality of life for people with bleeding disorders and their families through Brian's role as Pharmacist and President and Rhonda serving as a Patient Advocate and Chief Operating Officer of a home infusion company. In their role as co-chairs of the Flight for Tomorrow Invitational Golf Tournament, they have raised 2 million dollars to support the needs of the bleeding disorders community. This scholarship was created in their honor to support individuals with bleeding disorders in their pursuit of a career in a medical profession.

Florida residents with hemophilia, von Willebrand disease, or other related hereditary bleeding disorders are eligible to apply for the Founders Medical Scholarship. Applicants must have completed a bachelor's degree and be enrolled in a post-baccalaureate program in one of the following areas of study: medicine, nurse practitioner, pharmacist, psychiatrist, physician assistant, physical therapist, or medical social worker.

Scholarships are awarded based on merit, need, record of community service, and the aspirations of the applicant as reflected in a 250–500-word essay. The monetary award is given directly to the institution that the recipient attends.

Application forms, essays, college transcripts, and three recent instructor or employer references are required to complete the application please submit this information, to the Bleeding Disorders Foundation of Florida at 1350 Orange Ave, Suite 227, Winter Park, FL 32789 or info@bleedingdisordersfl.org. Recipients of the awards will be notified 30 days after receiving the application. ***Incomplete Applications will not be reviewed.***

Application forms may be downloaded from the BDFF web site: <https://bleedingdisordersfl.org/what-we-do/scholarships/>. If you have any questions regarding the application process, please contact the Bleeding Disorders Foundation of Florida at 1-800-293-6527 or info@bleedingdisordersfl.org.

Sincerely,
The Bleeding Disorders Foundation of Florida

Scholarship Application Form for Individuals with Bleeding Disorders Pursing a Medical Career

Personal Information:

- Full Name: _____
- Date of Birth: _____
- Email Address: _____
- Phone Number: _____

Academic Information:

Name of medically related program being studied: _____

Institution: _____

Anticipated Graduation Year: _____

Current Year of Study: _____

Bleeding Disorder Information:

Type of Bleeding Disorder (e.g., Hemophilia A, Hemophilia B, von Willebrand disease): _____

Name of Hemophilia Treatment Center: _____

Essay: Please attach a typed 250–500-word essay describing your motivation for pursuing an advanced degree in a medical field and your career goals after attaining that degree.

References: Three recent references from instructors or employers are required. These references should address your strengths and weakness as a student, your commitment to pursuing a career in the medical sciences and any other characteristics that make you a good candidate for this scholarship. The

references can be submitted with your application, mailed to the Bleeding Disorders Foundation of Florida at 1350 Orange Ave, Suite 227, Winter Park, FL 32789, or emailed to info@bleedingdisordersfl.org.

Community Service:

Provide a list of the volunteer work you have done for the BDFF or another bleeding disorder organization and the dates of service. **All applicants must have volunteered with BDFF or another bleeding disorder organization within the 2025/2026 calendar year to be considered virtual volunteer opportunities are available.**

By submitting this application, I certify that the information provided is accurate and complete.

Applicant's Name: _____

Signature: _____

Date: _____