



FOUNDATION

350 ST. ANDREWS ROAD ■ SUITE 242 ■ SAGINAW, MI 48638-5988
PHONE: (989) 790-3590 ■ FAX: (989) 331-6720 ■ CELL: (989) 284-8884
EMAIL: JMCRAMER@SAGINAWCOUNTYMS.COM ■ WWW.SAGINAWCOUNTYMS.COM

16th ANNUAL ESSAY CONTEST “WHY I WANT TO BE A PHYSICIAN IN SAGINAW COUNTY”

Deadline: April 30, 2026

Open to high school juniors and seniors who live and attend high school in Saginaw County

The following documents must be submitted in Word or PDF format:

- Essay - approximately 500 words in length (*please include your name, contact information and date in the upper right hand corner of all pages*)
- Application (*see next page*)
- Resume

Applications may be downloaded from www.SaginawCountyMS.com under the “Essay Contest” tab.

RETURN COMPLETED APPLICATION, ESSAY AND RESUME BY APRIL 30 TO:

Saginaw County Medical Society Foundation
350 St. Andrews Road, Suite 242
Saginaw, Michigan 48638-5988
Telephone (989) 790-3590 | Cell (989) 284-8884 | Fax (989) 331-6720

PREFERRED METHOD: E-mail **Joan M. Cramer**
jmcramer@saginawcountymms.com ▶▶▶ **PLEASE REQUEST RECEIPT**
INFORMATION WAS RECEIVED

**ANY ESSAYS OR APPLICATIONS THAT DO NOT INCLUDE
REQUESTED INFORMATION WILL BE DISQUALIFIED**

DETAILS OF CONTEST:

- Prizes:
 - Zubeda S. Khan, MD Memorial Award - \$1,000
 - First Place - \$1,000
 - Second Place - \$600
 - Third Place - \$400
 - Fourth-Tenth Place - \$100

Sponsored by the Saginaw County Medical Society Foundation. The Saginaw County Medical Society is the Professional Association of Physicians in Saginaw County.



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2026 ESSAY CONTEST APPLICATION

PERSONAL INFORMATION

Date: _____, 2026

Name: _____

Address: _____

Cell Phone: _____

*City, Zip: _____

****MUST LIVE AND ATTEND HIGH SCHOOL IN SAGINAW COUNTY TO BE ELIGIBLE***

E-mail: _____

High School: _____ Junior Senior GPA: _____

College Planning to Attend: _____

Medical Specialty of Interest: Emergency Med Family Med Internal Med Ob/Gyn
Pediatrics Psychiatry Surgery Other _____

Father's Name: _____ Father's email _____

Father's Employment: _____ Father's cell _____

Mother's Name: _____ Mother's email _____

Mother's Employment: _____ Mother's cell _____

Include 500 word essay "Why I Want To Be a Physician in Saginaw County" and Resume with this Application

****NOTE: Essays received without Application and Resume will be ineligible.***

Applications may be downloaded from www.SaginawCountyMS.com under the "Essay Contest" tab.

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PREFERRED METHOD: E-mail Joan M. Cramer

jmcramer@saginawcountymys.com ▶▶▶ PLEASE REQUEST RECEIPT

INFORMATION WAS RECEIVED