

Breathe New Hampshire's
Mary C. Manning
Scholarship



Named in memory of Mary C. Manning, past Vice-President and Director of the organization, who gave her time, talent and financial support to benefit lung health in New Hampshire. The scholarship was established to continue Mary C. Manning's legacy and to support future public health students further their academic interests.

A \$500 scholarship will be awarded annually.

Eligibility Requirements

- Scholarship will be awarded to students interested in pursuing a degree in public health, nursing or respiratory therapy
- Undergraduate or graduate programs are eligible
- Applicant must be a NH resident

Application Requirements

- Application must be completed in full to be considered (additional pages may be included)
- Please include college letter of acceptance or current college transcript
- Please include one letter of reference

To Apply:

Online: breathenh.org/resources/scholarship

By Mail: Breathe New Hampshire

Attn: Scholarship Committee

145 Hollis Street, Unit C

Manchester NH 03101

By Email: info@breathenh.org

Application Deadline: September 15, 2027

Notification will be made by the end of November

Breathe New Hampshire, 145 Hollis Street, Unit C, Manchester, NH 03101

Ph: 603-669-2411 ~ info@BreatheNH.org ~ BreatheNH.org

(OVER)

Breathe New Hampshire's Mary C. Manning Scholarship

PLEASE PRINT

Student's Name

Student ID Number

Address of Residence

Phone

Email

College Attending

Major Being Pursued

Year in School

Please briefly describe your career goals:

Please highlight any school or community service activities you have recently participated in:

Are you familiar with Breathe New Hampshire or do you have a connection to the organization?

How do you see the importance of lung health as it applies to your future career goals?

How did you learn about the Mary C. Manning scholarship?

Do you currently vape or use tobacco products? (Please circle)

YES

NO

I certify that the information in this application is true and complete to the best of my knowledge.

Signature

Date

Signature of Parent or Guardian
(if under 18 years of age)

Date

Printed Name

Relationship to Minor