



WESTERN NEW YORK

**BloodCare**

SPECIALISTS • LAB • PHARMACY

# **WESTERN NEW YORK BLOODCARE**

**Dr. Martin Brecher Scholarship**



Dr. Martin Brecher graduated from UB School of Medicine in 1972. He did his pediatric residency at Buffalo Children's Hospital, followed by a fellowship in pediatric hematology/oncology at Roswell Park and Buffalo Children's Hospital. He was Chief of the UB Division of Pediatric Hematology Oncology from 1990 until his retirement in 2016. In addition to his administrative responsibilities, he did patient care, teaching, and clinical research.

During his years of clinical practice, Dr. Brecher treated pediatric patients with cancer, as well as those diagnosed with non-malignant blood disorders, including patients with bleeding and clotting abnormalities. This led to his involvement with Western New York BloodCare. He served on their Board of Directors for more than 10 years. These were years of tremendous growth for WNY BloodCare. Among the changes he was involved in was the development of a much closer collaborative relationship with the School of Medicine. This, in turn, has boosted academic activities within the Center, including new research initiatives and an expanded commitment to teaching and training individuals in a variety of disciplines who interact with patients with bleeding and clotting disorders. It is within this context that we will award the Dr. Martin Brecher Scholarship.

## Scholarship Information

### *Scholarship Mission:*

The mission of the Western New York BloodCare Dr. Martin Brecher Scholarship is to provide financial assistance for advanced education and training to individuals in a variety of disciplines who will interact with patients who have bleeding and clotting disorders.

### *Who is eligible to apply?*

Individuals who are pursuing a degree or postgraduate program in medicine, nursing, pharmacy, PT, OT, social work or a related health care field.

### *How often will scholarships be given?*

Scholarships will be awarded annually.

### *How much are the scholarship awards?*

The amount given will be dependent on the number of applicants, the category of the applicant's program, and the discretion of the scholarship committee. This award can be up to \$10,000 for the academic year.

### *How are award recipients selected?*

1. Academic performance is heavily weighted.
2. Must show proof of enrollment or exceptional standing with an institution or research committee.
3. Must include all requested documents and complete essay questions.

RETURN THE COMPLETED APPLICATION AND ATTACHMENTS BY:

**June 1, 2025**

TO:

SCHOLARSHIP COMMITTEE  
WESTERN NEW YORK BLOODCARE  
1010 MAIN ST.  
SUITE 300  
BUFFALO, NY 14202

\*PLEASE NOTE THAT APPLICATIONS RECEIVED INCOMPLETE WILL NOT BE CONSIDERED FOR REVIEW BY THE SCHOLARSHIP COMMITTEE.

The WNYBC scholarship application is available on our website at:

[www.wnybloodcare.org](http://www.wnybloodcare.org)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Current Affiliation with WNYBC: \_\_\_\_\_

If yes, please list: \_\_\_\_\_

Current Academic Affiliation: \_\_\_\_\_

Have you been awarded a WNYBC scholarship in the past? Yes or No

If so, when: \_\_\_\_\_

## **Required Essay**

The required essay should reflect your personal and professional experiences, challenges, and aspirations. Your essay should be detailed and require critical thinking. It should also emphasize how your education, experiences and aspirations focus on the Scholarship Mission above.

In addition, please respond to the three questions below. There are no requirements for length and your responses must be typed.

1. Why are you interested in providing care for patients who have bleeding and clotting disorders?
2. What is your research focus relative to bleeding and clotting disorders, and why this focus?
3. Provide any and all information about you and your circumstances that the scholarship committee should know as they review your application.

## **Transcripts and Letters of Recommendations**

The most recent official transcript is required from your institution. The transcript must be official; the committee will not review applications with non-official transcripts. Send directly to Western New York BloodCare at the address listed below.

Three letters of reference are required. You MUST provide three letters of reference in order to be considered for the scholarship and to have your application reviewed by the committee.

Forward all correspondence with required documents to:

Jessica Wulf

[jwulf@wnybloodcare.org](mailto:jwulf@wnybloodcare.org)

OR

Scholarship Committee

Western New York BloodCare

1010 Main St.

Suite 300

Buffalo, NY 14202

Please reach out to Jessica Wulf for any questions or concerns, at (716) 218-4007.

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information will result in termination of any scholarship granted.

Applicant's Signature:

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Date: \_\_\_\_\_