

See exhibit file

# JULIUS ROSENWALD FUND

4901 ELLIS AVENUE

CHICAGO

Application and accompanying documents should be filed as early as possible for the convenience of the Fellowship Committee, preferably during the early autumn. No application can be considered by the Committee unless the completely filled-out blank and all of the materials requested reach the Director for Fellowships by January 5, 1940.

Negro

White Southerner

Name in full ..... Robert Petrie Walton .....

Present address ..... School of Medicine, University, Mississippi. ....

City State

Permanent address " " " " .....

City State

Present position (be specific) ..... Professor of Pharmacology .....

Institution or organization ..... University, Miss. .... Annual salary \$3600

Address " " " " .....

City State

Specific Field ..... Pharmacology .....

Concise statement of plan of work It is planned to complete a program of training which will constitute full qualification for teaching and research work in the field of Pharmacology. The applicant, a native Southerner, expects to work in the South with a particular recognition of local problems. His present research interest, a study of the effects of marihuana, is a sociological problem with its explanation based on medical principles.

What institution do you wish to attend? ..... The University of Chicago .....

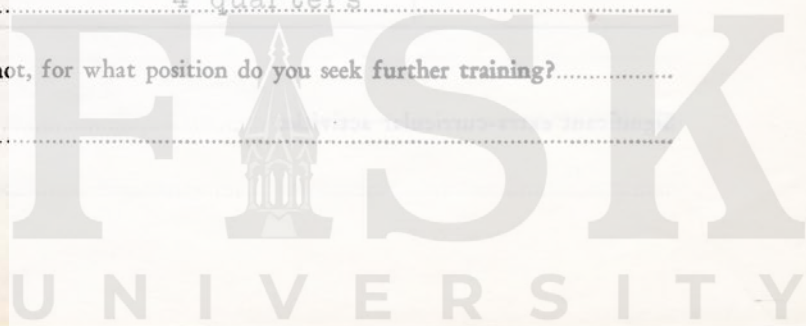
Have you been admitted? Yes ..... For what degree will you work? M.D. ....

Under whose supervision? Faculty .....

When do you wish to begin the study or project proposed? Spring 1940 .....

What is your estimate of its probable duration? 4 quarters .....

Will you return to your present position? Yes ..... If not, for what position do you seek further training? .....



**Personal History**

Place of birth Guthrie, Kentucky. Date of birth Jan. 18, 1905

Single, married, widowed, divorced Married

Name and address of wife or husband Mary H. Drinkard Walton, University, Miss.

Occupation and salary of wife or husband None

Number and ages of children Two children, ages 6 and 3.

Dependents 3 To what extent? complete Relationship Wife, 2 children

Have you any constitutional disorder or physical disability? no.

(The Committee on Fellowships reserves the right to require a full physical examination.)

**Education**

One official transcript of your college and university records together with four copies must be submitted with your application. (Copies may be typed by the applicant.)

	Name of Institution	Period of Study (Give dates)	Degrees, Diplomas, Certificates (Give dates)
College	Centenary College of La.	1921-1924	B.S. (summa cum laude) 1924
University	La. State University	summer 1923	
Professional or technical	Columbia University	1924-1929	M.A., 1925 Ph.D., 1929.
	Univ. of Minnesota	summer 1936	
Special study	Univ. of Chicago	summers 1931, 1935,	1933, 1934, 1937, 1938, 1939
	European Universities	summer 1932	observation of teaching and re- search methods

Significant extra-curricular activities .....



**Experience**

Give record chronologically.

Institution or Organization	Address	Position	Inclusive Dates	Annual Salary
Centenary College		Chemistry instructor	1922-4	Maintenance
N.Y. Public Library		Chemistry librarian (part time)	(1924-9)	\$1800
Tulane University, Medical School		Pharmacology instructor	1929-32	
" " "	" "	" asst. professor	1932-7	\$2700
Univ. of Tennessee	" "	"	winter 1937	\$333/mon
Univ. of Chicago	" "	" visiting lecturer	spring 1938	\$400/mon.
Univ. of Mississippi	" "	" professor		\$3600

**Accomplishments**

1. Of what learned, scientific, or artistic societies are you a member? American Society for  
 Pharmacology and Experimental Therapeutics; American Chemical Society  
 (past president, La. Section); Society for Experimental Biology &  
 Medicine; Sigma Xi.

2. What research or creative work have you done? (If in business or a profession, give evidence of standing and achievements.)

Publications listed and attached

3. Publications

" " "

4. List scholarships or fellowships you have previously held or now hold, stating in each case the places and periods of tenure, the studies pursued during your incumbency, and the amounts of the stipends.

None



Budget Estimate (if not for academic year state period) 4 quarters

Room and board (family of 4) ..... \$ 1200.....  
 Clothing ..... 250.....  
 Insurance ..... 225.....  
 Tuition ..... 600.....  
 Transportation ..... 125.....  
 Miscellaneous ..... 600.....  
 ..... \$ .....  
 Total amount needed ..... \$ 3000.....  
 Amount applicant can provide ..... \$ 1000.....  
 Amount requested from Fund ..... \$ 2000.....

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If you have applied or expect to apply elsewhere for any fellowship for the same period (which is permissible) state the facts regarding such application.

Have applied to the Lalor Foundation for a fellowship to cover the same period. This group, however, has never granted a fellowship award for medical training.

**References**

List references from whom confidential information may be obtained concerning your professional qualifications and from whom expert opinion may be obtained as to the value and practicability of your proposed plan of work.

Name of Reference	Position	Address
Dr. A.B. Butts	Chancellor	University, Miss.
Dr. Rufus C. Harris	President	Tulane University
Dr. O.W. Hyman	Dean	University of Tennessee, Memphis, Tenn.
Dr. E.M.K. Geiling	Chairman, Pharmacology Dept.	University of Chicago,
Dr. Garfield Powell	Assistant to Dean	Columbia University.
Dr. L.W. Bass	Assistant Director	Mellon Institute Pittsburg, Pa.

**Statement of Plan of Work**

Submit a statement giving detailed plans for your work during the tenure of your fellowship. This statement should include: (1) a full description of the project, including its character, scope, and significance; (2) the present state of the project (time of commencement, progress to date, etc.) and expectation as to completion; (3) the proposed university, institution of similar grade, or other place where the work would be carried on, and the authorities with whom it would be done; (4) your expectation as to publication or use of the results of your study; (5) subsequent plans for your career.

Your plan of work should be complete and carefully prepared. Submit six copies typed on 8 1/2" x 11" paper. Your name should be on each sheet.

SIGNATURE..... *John P. Weston*

