

The Julius Rosenwald Fund is making a review of the Negro fellowships which it has granted during the past seven years. Since an appraisal of our activity thus far in this field will naturally have some effect on future policy, it is requested that all persons who have received fellowship grants from the Fund cooperate by filling in carefully the brief information asked for on the following blank and returning the information promptly to the Fund.

Name Mrs Eugenia A. Button Cordie

Position at time grant was made Staff Nurse, Nashville Public Health Nursing Council, Nashville, Tenn.

Specific purpose of the fellowship study To be better prepared for public health nursing service.

Subject studied under the fellowship (or special work accomplished) Public Health Administration & Public Health Nursing

Institution at which fellowship study was carried on (or, if no specific institution was attended, state nature and place of the work carried out under the grant)

Observation work - City Health Dept Birmingham Ala, Tuskegee Ala, Mississippi State Board of Health, Shipps Post. Philadelphia, Pa, Class room work Columbia Univ, N.Y. City
Present position or occupation unemployed

Your opinion of benefits received from the fellowship Benefits derived from this course have been innumerable, the most outstanding of which has been the broadening of my knowledge in public health work, to say nothing of the allied subjects covered during the course and the observation work in the various states.

I would appreciate it if some Arrangement could be made to further my studies in the field of Public Health,

The following information is being furnished to you for your information and to enable you to make a report on the progress of the work carried out under the grant.

Position of the grant was as follows:
Specific purpose of the fellowship study: To determine the effect of the following factors on the health of the community:
Subject applied under the fellowship (or special work assignment): Public Health Administration & Public Health Services
Institution at which fellowship study was carried on (or, if a special institution was attended, state name and place of the work carried out under the grant):
System's position or occupation:
Your opinion of health service from the fellowship to the community:
The Commission has been informed of the progress of the work carried out under the grant and has been most interested in the results of the study.



CROSS REFERENCE RECORD

FIRM NAME OR SUBJECT SCHOLARSHIP (ALBRITTON EUGENIA) **FILE NO.**

DATE 1/6/36

REMARKS

Present address

Mrs. N. H. Cordice (married name)
Fayetteville Street
Durham, North Carolina

SEE TENNESSEE STATE OF **FILE NO.**

DATE **SIGNED**

FILE CROSS REFERENCE RECORD UNDER NAME OR SUBJECT LISTED AT TOP OF THIS SHEET, AND IN PROPER DATE ORDER.

THE PAPERS REFERRED TO SHOULD BE FILED UNDER NAME OR SUBJECT LISTED UNDER "SEE"

YAWMAN AND ERBE MFG. CO.
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