

JULIUS ROSENWALD FUND

4901 ELLIS AVENUE

CHICAGO

Classification I. Negro

II. White Southerner _____

III. Specific Field _____

Concise statement of plan of work It is my desire to be able, with the training and experience I have had as a background, to study for specialization in the fields of Internal Medicine and Diagnosis by a period of study in England.

Personal History

Name in full Henry Rutherford Butler, Jr.,

Present address 20 Boulevard, Northeast, Atlanta, Georgia Telephone Walnut 1548

Permanent address 20 Boulevard, Northeast, Atlanta, Georgia

Present occupation Physician Salary - - -

Place of birth Atlanta, Georgia Date November 1, 1899

Single, married, widowed, divorced Single Date of marriage - - -

Name and address of wife or husband - - -

Occupation and salary of wife or husband - - -

Number and age of children - - -

Dependents One To what extent? Wholly Relationship Mother

Name of nearest relative Mrs. H.R. Butler, Sr. Address 20 Boulevard, NE Occupation - - -

Have you any constitutional disorder or physical disability? None whatever

The Fellowship Committee reserves the right to require a full physical examination.

F I S K
U N I V E R S I T Y

Education

1. Give a summary of your education in the following form:

	Name of Institution	Period of Study (Give dates)	Degrees, Diplomas, Certificates (Give dates)
High School	Atlanta Univ. High School	Sept., 1914 to May, 1918	Certificate May 29, 1918
College	Atlanta University	Sept., 1918 to May, 1922	A.B. diploma May 31, 1922
University			
Technical			
Professional	Harvard Medical School	Sept. 25, 1922 to June, 1926	M.D. diploma June 24, 1926
Special Study	Kansas City General Hosp.	July 1, 1926 to June, 1927	Intern certifi- cate June 30, 1927
	National Board Med. Exam.	(Please see folder)	D.N.B. diploma July 3, 1936
Medical licenses in good standing	Kansas - No. 6926		
	Georgia - No. 3036		
	Michigan - No. 12006		

An official transcript and four copies of your college and university records must be submitted with your application.

Three sets of transcripts attached.

2. Extra-curricular activities:

Dramatics - (in English, in French and in German)

3. Give a list of the 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.

Harvard Medical School - Lewis and Harriett Hayden

Scholarship - \$100.00 - 1923-24



Experience

(Students should include all part-time work they have done.)

Institution or Organization	Address	Position	Under Direction of	Salary
(1) Well Baby Clinic	Courtland at Houston	Physician	City of Atlanta	- - -
(2) Transient Bureau	214 Auburn Ave., NE	Physician	U. S. government	\$65 per mo.
(3) Child Welfare Asso. of Fulton and DeKalb Counties	779 Juniper St., NE	Physician	Miss F. van Sickler and Board	\$25 per mo.
NOTE: Please see attached sheet under heading "EXPERIENCE" for additional information on the above three positions.				

Accomplishments

1. Of what learned, scientific, or artistic societies are you a member?

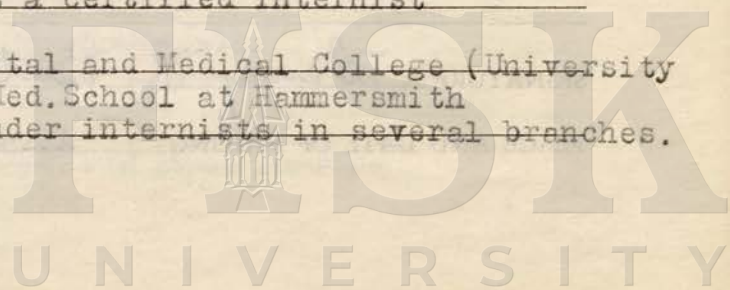
Atlanta Medical Society, Georgia State Medical Association,
National Medical Association, John Andrew Clinical Society (Tuskegee)

2. What advanced work, research, or creative work have you already done?

3. List of publications "Coronary Disease" (dealing with coronary heart disease)
read before the John Andrew Clinical Society at Tuskegee, April 13, 1933,
and later accepted for publication in the Journal of the National Med. Assn.

Plans for Work

1. For what position do you seek further training? Specialization in Internal Medicine & Diagnosis
2. What course of study do you wish to take? Advanced courses in several fields related to Internal Medicine and Diagnosis, e.g., Cardiology, Lab. Diagnosis, etc.
3. For what degree are you working? Qualification as a certified internist
4. In what institution do you wish to study? London Hospital and Medical College (University of London) and the new Postgraduate Med. School at Hammersmith
5. Under whose supervision? Work would be done under internists in several branches.



6. Have you assurance that you will be admitted to this institution? Yes, as far as the London Hospital is concerned. I have visited and corresponded with the dean of the school.

7. If you are not planning study at an institution, indicate the type of special work you propose to do _____

8. If awarded a fellowship

When would you wish to begin the study proposed? Summer of 1937

What is your estimate of its probable duration? The American Board of Internal Medicine specifies five years as a minimum for meeting their requirements as certified internist, altho excellent training toward specialization can be secured in two or three years.

Statement of Plan of Work

Submit on separate sheets a statement giving detailed plans for your work during your tenure of a fellowship. This statement should include (1) a description of the project, including its character and scope, and the significance of its presumable contribution; (2) the present state of the project, time of commencement, progress to date, and expectation as to completion; (3) the proposed university, or institution of similar grade, or the place where the work would be carried on, and the authorities, if any, with whom the work would be done; (4) your expectation as to publication or use of the results of your study; and (5) subsequent plans for your career. *This statement should be complete and carefully prepared.* (Please submit one more copy of PLAN OF WORK than the number of your references.)

Five copies of PLAN OF WORK enclosed.

References

Submit a list of references from whom further confidential information may be obtained concerning your 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
<u>2-19-37</u> Mr. Forrester B. Washington	Director Atlanta School Social Work	247 Henry St. SW. Atlanta, Ga.
Miss P. G. Rockefeller	Treasurer	Spelman College, Atlanta, Ga.
Dr. J. C. Aub	Associate Prof. Med.	Harvard Med. School, Boston
Dr. Walter Gray Crump	Prof. Surgery New York Medical School and Flower Hospital	New York 837 Madison Avenue

If you have applied or expect to apply elsewhere for any fellowship or scholarship for the same period, state the facts regarding such application.

SIGNATURE

Henry R. Butler, Jr., A.B., M.D., D.Sc. B.

PLACE AND DATE OF MAILING

Atlanta, Georgia, February 17, 1937

F I S I K
UNIVERSITY