

North Carolina Foundation for Nursing Scholarship Application

Please Use This Application for NCNA Southwest Region Scholarship

NCNA Southwest Region Scholarship

The NCNA Southwest Region Advisory Committee has partnered with the North Carolina Foundation for Nursing to establish a scholarship program to promote professional nursing practice by encouraging registered nurses to pursue additional education.

Purpose: Scholarships are available to NCNA members who live or work in the Southwest Region who have chosen to further their professional career by pursuing education at the baccalaureate level or graduate level.

Requirements (*Scholarship applicants must meet the following criteria*)

1. Must be a resident of North Carolina for at least 12 months prior to application.
2. Must be a member of NCNA who lives or works in the NCNA Southwest Region.
3. Must be a current student or have been admitted to a program at an accredited program in North Carolina offering a post-licensure degree in nursing (RN to BSN, MSN, DNP or PhD in Nursing). Online programs are also acceptable, provided you are a North Carolina resident.
4. May be enrolled part-time or full-time, at least 6 hours per semester for RN to BSN.
5. Must have a minimum cumulative grade point average of 3.0 in work already completed in the program in which currently enrolled or in previous nursing program, if no course work has been taken in the current program.

Amount of Scholarship: Up to \$1,000 per year

Scholarship Information

The NCNA Southwest Region Scholarships are awarded without regard to race, sex, religion, age or national origin. Priority will be given to NCNA members. The applicant is responsible for assembling the materials together in one packet and submitting it to the NC Foundation for Nursing by 4:00 PM on May 31, 2019.

Incomplete applications or those received after 4:00 PM on May 31, 2019 will not be considered for the Scholarship Funding.

Please submit scholarship application and all related materials via email or mail.

Email

- Email Scholarship Application & All Related Materials **as a single pdf document** to RNs@NCNurses.org

Mailing Address

- Mail Scholarship Application & All Related Materials To
NC Foundation for Nursing, Inc.
Attn: Scholarship Committee
4350 Lassiter at North Hills Avenue, Suite 250
Raleigh, NC 27609

Application Process

Provide the Scholarship Committee the following information in a single envelope or pdf document:

1. Completed application.
2. A statement of not more than 500 words that describes the applicant's reasons for pursuing additional education and addresses the following areas:
 - a. How the applicant promotes the profession of nursing.
 - b. How the applicant plans to use a baccalaureate or graduate degree to promote the profession of nursing and to support NCNA
3. Two letters of reference from individuals knowledgeable of the applicant's character and potential for professional contributions to nursing.
4. Proof of acceptance into a post-licensure educational program at an accredited institution in North Carolina.
5. Proof of residency or employment in one of the Southwest Region counties.
6. **Unofficial** transcript(s) of grades from diploma or associate degree program and current program (if enrolled currently).

Basis of Awards

The Scholarship Committee will award the following point values in the seven categories listed below when judging applicant for scholarship awards

1. **Applicant Statement – Maximum of 25 points**
The applicant statement is a summary of not more than 500 words prepared by the applicant which demonstrates qualifications for the award. This statement should include all applicable areas listed under the Applicable Process section.
2. **Professional Involvement – Maximum of 25 points**
Membership in all professional nursing organizations, including NCNA. Points are awarded for length of service, leadership positions, and level of involvement within the organization with weight increasing at state and national level of involvement.
3. **Letters of Reference – Maximum of 10 points**
Two letters of reference must be included to address the applicant's leadership potential and meaningful contributions to professional nursing.
4. **Grade Point Average – Maximum of 10 points**
Unofficial transcripts based on diploma or ADN/ASN program and student's current program (if applicable).
5. **Honors – Maximum of 10 points**
Points will be awarded for any professional honors and awards received.
6. **Certification – Maximum of 10 points**
Points will be awarded for current certification within the applicant's area of practice.
7. **Community Involvement – Maximum of 10 points**
The applicant should include leadership roles in the community, such as PTS President, Chair of community groups, etc.

Scholarship Application

This form must be completed and typed. Hand written applications will not be accepted.

Legal Name:

Home Address:

City:

Zip:

Home Telephone:

Email:

School Applicant Will Attend:

Student ID Number *(if known)*:

Approximate Cost of Tuition, Fees, & Books Per Year:

Other Sources of Funding and Amounts:

Anticipated date of graduation: _____

Cumulative Grade Point Average: _____

A. Please list all professional activities; include years of participation, all offices or other positions of leadership held:

B. Please list any honors, awards, and certifications with dates received:

C. Please list all current certifications in area of practice:

D. Please list all community activities; include years of participation, all offices or other positions of leadership held:

E. Please list the names and contact information of the persons writing a letter of reference on your behalf.

1. _____
2. _____

F. Please list your last three employers, dates of employment, and positions held:

1. _____

2. _____

3. _____

I certify that the information provided in the above application is accurate. I agree that I will return the scholarship funds to the foundation if I withdraw from school during the funded year.

Signature: _____ Date: _____

For NCFN office use only

Application received _____ Sent to reviewers _____