

HealthEd Connect

PROFESSIONAL NURSES ASSOCIATION (PNA)

Scholarship Application



USA applicant eligibility criteria:

1. Member of Community of Christ
2. Grade point average of 3.0 or above on a 4.0 scale
3. Demonstration of need through filing of FAFSA
4. Enrolled in last two years of a nationally accredited
 - baccalaureate nursing program, or
 - graduate nursing program
5. Official college transcript, including last semester of college courses and cumulative GPA
6. Two letters of reference including one from a Community of Christ minister

NON USA applicant eligibility criteria:

1. Active participant in Community of Christ
2. Verification of enrollment in nursing program in own country
3. Demonstration of need
4. Two letters of reference including one from a Community of Christ minister

AWARDS: Scholarships of up to \$2000.00 are awarded. (\$1,000 year one and \$1,000 year two if GPA is maintained at 3.0 or above.) Individual circumstances in developing countries will be taken into consideration.

Deadline for Applications is September 15. Scholarship winner will be notified of selection no later than December 15.

Applications should be sent to:

*Dr. Sherri Kirkpatrick
HealthEd Connect
1401 West Truman Road
Independence, MO 64050
skirkpatrick@healthedconnect.org
(816) 519-4925*

Personal Information

Full Name: _____

Email Address _____ Date of Birth _____

Permanent Address: _____

Congregation/location of Community of Christ membership _____

Telephone Number (Area Code) : _____ Cum Grade Point Average: _____

Nursing Program:

Name of School _____

Address _____

Financial Aid department/contact person _____

Beginning month/year of program _____ Ending month/year of program _____

Financial expenses for **one** year:

Tuition _____ Books _____ Uniforms _____ Other fees _____

Briefly explain your financial need for a scholarship: _____

Date FAFSA was filed (USA applicants only) _____

Letters of reference have been requested from the following:

- a) Community of Christ minister _____
- b) Personal reference _____

Applicant's Signature _____ Date _____

On the reverse side or on a separate paper, please make a statement regarding your goals in nursing and current accomplishments, awards, and activities.