



INF

IOWA NURSES FOUNDATION

SCHOLARSHIPS

NURSES HELPING NURSES



INF SCHOLARSHIP APPLICATION & CRITERIA

Statement of Purpose

The Iowa Nurses Foundation Scholarships promote professional nursing in Iowa by supporting the continued education of future nurse leaders. Scholarship recipients will articulate a commitment to educational accomplishments and professional goals to enhance the delivery of quality health care in Iowa through practice, research, or teaching.

Applicants can be full or part time students attending an approved program leading to an RN-BSN or MSN in Nursing, DNP, or a PhD in Nursing or a related field, such as education. **To qualify for the scholarship, applicant must be a member of the Iowa Nurses Association.**

Two recipients will be chosen; each will receive up to a \$2,000 Scholarship.

Applicant Criteria

RN-BSN (scholarships not available to pre-licensure nursing students)

- For students who have successfully completed at least 50% of the nursing program curriculum.
- Must have a career plan to work in Iowa.

MSN, DNP, or PhD

- For students who have completed at least 12 semester hours of graduate work leading to a master's degree in nursing or doctoral studies in nursing or a related field.
- Must have a career plan to work in Iowa.

Application Process Overview

Applicants must submit the following:

- Applicant name
- Applicant email address
- Applicant mailing address
- Applicant phone number
- Headshot Photo – *INF will only use if applicant is awarded a scholarship*
- Scholarship level applicant is seeking (RN-BSN or MSN/DNP/PhD)
- Professional promise essay
- Resume or curriculum vitae
- Academic transcripts
- Minimum two (2) letters of reference for RN-BSN
- Minimum three (3) letters of reference for MSN/DNP/PhD level degrees
- INF Scholarship Reference Request Form provided on page 4
- Reference letters must be returned to applicant and included with application submission

To be considered for a scholarship, all application items must be included with submission.

INF SCHOLARSHIP APPLICATION CONTENT & INFORMATION

Applicant Contact Information

Headshot Photo – *INF will only use if applicant is awarded a scholarship*

Scholarship Level Applicant is Seeking

- RN-BSN
- MSN, DNP, or Doctoral Studies

Professional Promise Essay

Form and style will be evaluated for punctuation, grammar, and spelling.

- What are your career goals?
- Describe the area(s) of nursing practice where you believe you have something special to offer.
- RN-BSN: Discuss your interest in that area and how your interest and goals will enhance the delivery of quality health care in Iowa.
- MSN, DNP, or Doctoral Studies: Discuss your interest in that area and how your interest and goals will enhance the delivery of quality health care in Iowa through practice, research, or teaching.
- Include a statement of how this financial assistance would impact your ability to meet your educational goals.
- Describe how you would use the funds to support your educational progress if you were to be awarded the scholarship. Scholarship recipients will be expected to provide progress reports on actual use of the funds and educational progress.

Resume or Curriculum Vitae, Including the Following Items

- Service activities in nursing, including involvement in any state or national nursing organizations that demonstrate leadership or professional development.
- Service activities in non-nursing areas that demonstrate leadership or community service.

Academic Transcripts

- From all institutions where nursing coursework was completed.

Letters of Reference

- **RN-BSN:** Provide at least two (2) professional letters of reference supporting your desire and ability to meet your educational goals.
- **MSN, DNP, or Doctoral Studies:** Provide at least three (3) professional letters of reference supporting your desire and ability to meet your educational goals.
- Must use the INF Scholarship Reference Request Form provided on page 4.
- All reference letters must be returned to the applicant.
- Applicant is responsible for submitting letters of reference with application submission.

To be considered for a scholarship, all application items must be completed in their entirety and included with submission.

INF SCHOLARSHIP REFERENCE REQUEST FORM

Letters of reference must be returned to the student at their email address included below.

Students are responsible for submitting their letters of reference with their scholarship application.

Scholarship Purpose Statement

The Iowa Nurses Foundation scholarship promotes professional nursing in Iowa by supporting the continued education of future nurse leaders. Scholarship recipients will articulate a commitment to educational accomplishment and professional goals to enhance the delivery of quality health care in Iowa through practice, research, or teaching.

Applicants can be full or part time students attending an approved program leading to an RN-BSN or MSN in Nursing, DNP, or a PhD in Nursing or a related field, such as education. ***To qualify for the scholarship, applicant must be a member of the Iowa Nurses Association.***

Two recipients will be chosen, each will receive up to a \$2,000 scholarship.

Applicant Criteria

RN-BSN (scholarships not available to pre-licensure nursing students)

- For students who have successfully completed at least 50% of the nursing program curriculum.
- Must have a career plan to work in Iowa.

MSN, DNP, or PhD

- For students who have completed at least 12 semester hours of graduate work leading to a master's degree in nursing or doctoral studies in nursing or a related field.
- Must have a career plan to work in Iowa.

Request for Letter of Reference

As part of the application process, you have been asked to write a reference for the following individual:

Applicant Name _____

Applicant Email _____

Scholarship applicant is seeking:

RN-BSN (not available to pre-licensure nursing students)

MSN

DNP

PhD

Questions regarding letters of reference should be directed to the applicant at the email address above.

To be used with hardcopy submission only!

Personal Information

Name: _____

Address: _____

Email: _____ Phone Number: _____

Please include the following with your application:

- Professional Promise Essay
- Resume or Curriculum Vitae
- Academic Transcripts
- Minimum two (2) letters of reference for RN-BSN
- Minimum three (3) letters of reference for MSN, DNP or PhD level degrees
- Headshot Photo

Scholarship applicant is seeking:

RN-BSN (not available to pre-licensure nursing students)

MSN

DNP

PhD

How To Apply:

Application cover page and required documents must be mailed to:

Iowa Nurses Foundation
2501 Jolly Road, Suite 110
Okemos, MI 48864

To apply online, please [click here](#). This cover page is not needed for online submissions.

Important Deadlines and Information:

- The scholarship application deadline is August 15.
- Scholarships will be awarded in August.
- Please note that all scholarship checks will be made out to the recipient, as well as the nursing school they are attending. Checks will then be mailed to the address the recipient provided in their application for them to deliver to the nursing school.

MIKE ANDERSON MEMORIAL FUND SCHOLARSHIP APPLICATION & CRITERIA

Purpose Statement

The Mike Anderson Memorial Fund Scholarship, together with the Iowa Nurses Foundation, promotes professional nursing in Iowa by supporting the education of future nurses. The late Mr. Anderson and his family desire to support deserving young people in the State of Iowa in obtaining a nursing school education. Scholarships shall only be awarded to students who are unable to finance their education.

Applicants need to be full or part-time students currently enrolled at DMACC, Grand View, or University of Iowa, College of Nursing with the intent of earning an ADN or BSN degree. ***It is important to note that students at these institutions are the ONLY individuals that can apply for this scholarship.***

One recipient will be chosen, and that individual may receive up to a \$2,000 scholarship.

Applicant Criteria

- Must be enrolled in a pre-licensure ADN or BSN program
- Must be currently enrolled at DMACC, Grand View, or University of Iowa College of Nursing
- Must be a resident of the state of Iowa at the time the scholarship application is submitted

Application Process Overview

Applicants must submit the following:

- Applicant name
- Applicant email address
- Applicant mailing address
- Applicant phone number
- Headshot Photo – *INF will only use if applicant is awarded a scholarship*
- Scholarship level applicant is seeking (ADN/BSN)
- Professional promise essay
- Resume or curriculum vitae
- Extenuating financial circumstances
- Academic transcripts
- Minimum two (2) letters of reference
- Mike Anderson Memorial Fund Scholarship Reference Request Form provided on page 8
- Reference letters must be returned to applicant and included with application submission

To be considered for a scholarship, all application items must be included with submission.

MIKE ANDERSON MEMORIAL FUND SCHOLARSHIP APPLICATION CONTENT & INFORMATION

Applicant Contact Information

Headshot Photo – *INF will only use if applicant is awarded a scholarship*

Scholarship Level Applicant is Seeking

- ADN or BSN

Professional Promise Essay

Form and style will be evaluated for punctuation, grammar, and spelling.

- What are your career goals?
- Describe the area(s) of nursing practice where you believe you have something special to offer.
- Discuss your interest in that area and how your interest and goals will enhance the delivery of quality health care in Iowa.
- Include a statement of how this financial assistance would impact your ability to meet your educational goals. Award recipients will be expected to provide progress reports on actual use of the funds and educational progress.

Resume or Curriculum Vitae, Including the Following Items

- Service activities in nursing, including involvement in any state or national nursing organizations that demonstrate leadership or professional development.
- Service activities in non-nursing areas that demonstrate leadership or community service.

Extenuating Financial Circumstances

- Word document explaining extenuating circumstances and need for financial support.

Academic Transcripts

- From all institutions where nursing coursework was completed.

Letters of Reference

- Minimum of two (2) letters of reference supporting your desire and ability to meet your educational goals
- Must use the Mike Anderson Memorial Fund Scholarship Reference Request Form provided on page 8.
- All references letters must be returned to the applicant.
- Applicant is responsible for submitting letters of reference with application submission.

To be considered for a scholarship, all application items must be completed in their entirety and included with application submission.

MIKE ANDERSON MEMORIAL FUND SCHOLARSHIP REFERENCE REQUEST FORM

Letters of reference must be returned to the student at their email address included below.

Students are responsible for submitting their letters of reference with their scholarship application.

Scholarship Purpose Statement

The Mike Anderson Memorial Fund Scholarship, together with the Iowa Nurses Foundation, promotes professional nursing in Iowa by supporting the education of future nurses. The late Mr. Anderson and his family desire to support deserving young people in the State of Iowa in obtaining a nursing school education. Scholarships shall only be awarded to students who are unable to finance their education.

Applicants need to be full or part-time students currently enrolled at DMACC, Grand View or University of Iowa College of Nursing with the intent to earn an ADN or BSN degree. ***It is important to note that students at these institutions are the ONLY individuals that can apply for this scholarship.***

Applicant Criteria

Pre-licensure ADN and BSN program

Currently enrolled at DMACC, Grand View, or University of Iowa College of Nursing

Resident of the State of Iowa at the time the scholarship application is submitted

Request for Letter of Reference

As part of the application process, you have been asked to write a reference for the following individual:

Applicant Name _____

Applicant Email _____

Scholarship applicant is seeking:

ADN

BSN

Questions regarding letters of reference should be directed to the applicant at the email address above.

MIKE ANDERSON MEMORIAL FUND SCHOLARSHIP APPLICATION



To be used with hardcopy submission only!

Personal Information

Name: _____

Address: _____

Email: _____ Phone Number: _____

Please include the following with your application:

- Professional Promise Essay
- Resume or Curriculum Vitae
- Extenuating Financial Circumstances
- Academic Transcripts
- Minimum two (2) letters of reference for RN-BSN
- Headshot Photo – *INF will only use if applicant is awarded a scholarship*

Scholarship applicant is seeking:

ADN

BSN

Only applications from students enrolled in the ADN or BSN programs at DMACC, Grand View or the University of Iowa College of Nursing are eligible to apply. At time of application submission, student must also be a resident of the State of Iowa.

How To Apply:

Application cover page and required documents must be mailed to:

Iowa Nurses Foundation
2501 Jolly Road, Suite 110
Okemos, MI 48864

To apply online, please [click here](#). This cover page is not needed for online submissions.

Important Deadlines and Information:

- The scholarship application deadline is August 15.
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