

# Daytona Beach Black Nurses Association P.O. Box 10389 Daytona Beach, Florida 32120

May 1, 2017

To: Currently Enrolled Nursing Students

**Re: 2017 Scholarship Applications** 

The Daytona Beach Black Nurses Association (DBBNA) would like to invite nursing students and other healthcare professional students who are currently enrolled in clinical courses to submit an application for our annual scholarship.

The scholarship will be awarded September 9, 2017 at the Annual Scholarship Banquet. Students may utilize this scholarship award for the fall or winter semester of 2017-2018. Scholarship funds are to be used to defray the cost of nursing school expenses. Attached you will find the scholarship application and criteria.

**Applicants must be an active member/volunteer of the DBBNA for a minimum of 3 months.** Please follow the scholarship criteria and submit the application by the 08/18/17 – this is the **absolute drop-dead deadline**. Please make copies if necessary.

### Important dates to remember:

Application deadline is **August 18, 2017** Scholarship Banquet is **September 9, 2017** 

Mail completed application to: DBBNA P.O. Box 10389 Daytona Beach, Florida 32120

#### **Contact Persons:**

Sharon James, Vice President: sjlovessj@aol.com

Tina Carlyle, Corresponding Secretary: msnurse2000@aol.com

Rosetta Bailey, Treasurer: rbaileyrn@aol.com

Sincerely, Scholarship Committee



# Daytona Beach Black Nurses Association Scholarship Criteria

Applicants must be enrolled in a school of nursing with all institutional prerequisites completed prior to submitting an application. Please follow the directions below:

#### **Deadline**

Application must be received by the deadline of August 18, 2017. No papers will be accepted after the deadline. Mailing address:

Daytona Beach Black Nurses Association P.O. Box 10389 Daytona Beach, Florida 32120

Submit a copy of current enrollment, official transcript and a letter of recommendation from a nursing instructor.

### **Essay Guidelines**

Each applicant is to submit with the application **a two-page typed**, **12 pitch font size**, **1" margins**, **and double-spaced essay**. Essay to include a description of extracurricular activities and community involvement. These may include (but not be limited to) chapter activities, community based projects, school level projects, organizational efforts, state level student nurse activities, activities impacting on the health and social condition of African Americans and other culturally diverse groups.

Also include a presentation of your ideas of what you can do as an individual nurse to improve the health status and/or social condition of African Americans and a statement about your future goals in nursing.



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### **Scholarship Application**

Personal Data		
Name:Last	First	MI
Address:		
City:		
Phone: Cell Phone:		
Email Address		
Education Data: PLEASE NOTE: Senior students are no	ot eligible	
Current School of Nursing:		
Current Program Enrolled in:		
Current Semester ADN: (circle one) 1st 2	2nd 3rd GPA	
Current Year BSN: (circle one) Sophom	ore Junior GPA	
LPN Graduation Date: GPA		
Signature: Date:		
Please give a brief statement explaining selected to receive the scholarship. (Atta		ald be used if you were
Please include a short biography of your scholarship recipient. ( <b>Attach sheet</b> )	rself to be included in the program if y	ou are selected as a
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### **Nursing Faculty Member Recommendation**

Name of Faculty Member:	Title:
College:	
Please provide a brief recommendation signifying why this student should rethe Daytona Beach Black Nurses Association:	eceive a scholarship from
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Faculty Signature:	Date: