APPENDIX F
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Congratulations on applying for this scholarship! By doing so, you exhibit the desire to further your professional growth as a school nurse. Please fill out the questions on this application. Your responses will be reviewed by the Scholarship Committee, and you will receive an email regarding the award if chosen.

Date: _____

Name: _____

Current Position: School, District, and Educational Level _____

_____

Please answer each of the questions below in 250 words or less:

1). Tell us about yourself.

2). What are your greatest strengths and weaknesses?

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3). Why do you deserve this scholarship? Please indicate what you plan to use the funds toward (Ex. Specific academic goal, national certification etc.).

4). What are your career goals?

5). What activities are you involved in?

6). Is there anything else you would like to add?

Thank you very much for taking the time to complete this application. We look forward to reviewing it and letting you know our response within a month of receiving it.

Best Regards,

The ASNC Scholarship Committee
CTschoolnurses.nursingnetwork.com