Scholarship Application

In alliance with NASN philosophy of BSN as entry into practice, KSNO intends to improve school nursing by assisting registered nurses employed in schools to advance their education. Applications are subject to a “blind” review by the Awards Committee. The following information is required to assist with distribution of scholarship funds. Funds will be sent to applicant upon receipt of scholarship application, and documentation of course completion.

Name:

Address:

1) NASN/KSNO Membership #: _______________ Years as a Member: ________
   (Current member and for at least preceding 2 Years)

2) Employer Name: _____________________________________

3) Total number of years employed as a school nurse: _____

4) Written proof of current Kansas RN license.

5) Letter of verification of enrollment at accredited institution for LPN to RN, BSN, BSN/MSN or other Master’s/Doctoral program, with an emphasis in School Nursing: (please attach)

6) Proposed plan of study and timeline for nursing degree/program completion:
   Start date: ________ Completion date: ________.

7) Copy of transcript verifying course completion

8) A one-page paper citing intent to advance school nursing practice by describing how your students and school system will benefit from receipt of this scholarship funding.

Revised 2017
Scholarship Application Information

Please mail to the Awards Chair, Rachel Knee 103 S. Normandy Olathe, KS 66061

Or email to rnee5633@gmail.com

If you have any questions please email

The deadline for application is April 14, 2017.

The following information must be included:

_____ Application

_____ Written proof of a current RN License

_____ Verification letter of enrollment and transcript for course completion at accredited nursing program

_____ Proposed plan of study with targeted start and completion dates

_____ One-page paper (“How this advanced degree will benefit your school nursing practice”) must accompany the application.

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