

Tricia's Scholarship Guidelines

Purpose: To assist an individual nursing student to advance his or her education.

General Guidelines:

1. The Scholarship Committee may be comprised of VNA staff, family member(s) of Tricia Marie Simpson Russell, RN, VNA Foundation Board Members, and community members.
2. The family members of Tricia Marie Simpson Russell, RN will be invited to serve on the committee annually, and notified when the scholarship applications will be reviewed.
3. The amount and number of scholarships shall be determined annually upon the recommendation of the Scholarship Committee and shall not exceed the annual earnings.
4. The scholarship will be distributed at the VNA Annual Recognition Dinner in February each year.

Applicant Guidelines:

1. Must be a resident of Northwest Indiana.
2. Must be able to provide evidence of application to or current enrollment in a nursing education program to be considered for aid.
3. Must submit the completed application, including self appraisal and letters of reference, by the stated deadline to be considered by the Scholarship Committee.

Recipient Guidelines:

1. Must be able to provide evidence of acceptance to an appropriate nursing education program before scholarship funds are distributed.
2. Scholarship funds shall be distributed to the recipient.
3. Scholarship funds shall be used for tuition, books, and other costs related directly to the nursing education.
4. Scholarship funds not expended in one calendar year from the date funds are distributed shall be returned to the Tricia's Scholarship Fund.
5. Tricia's Scholarship is renewable. Previous recipients must reapply for further funding.
6. Recipient agrees to sign receipt of check, guidelines and photographic release form.



VISITING NURSE ASSOCIATION FOUNDATION

Tricia’s Scholarship
in memory of Tricia Marie Simpson Russell, RN

Scholarship Application

Personal Data

Name: _____
Last First Middle

Address: _____
Street City State ZIP

Telephone: Home _____ Cell _____

Email: _____

Education

Schools attended, beginning with the most recent:

Name/Location Years Completed Major Degree GPA

Employment History

List positions held, beginning with the most recent:

• Company: _____

Position: _____ Length of Employment: _____

Responsibilities: _____

• Company: _____

Position: _____ Length of Employment: _____

Responsibilities: _____

• Company: _____

Position: _____ Length of Employment: _____

Responsibilities: _____

Skills/Qualification

Summarize any special training, skills, licenses and/or certificates:

Community/Outside Activities

List any volunteer, professional, trade, business or civic associations and any offices held. You may exclude memberships that would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status.

Organization

Offices Held

List any special accomplishments, awards, etc.

Career Goals

Desired Profession: _____

College/Vocational School Necessary to Achieve Certificate or Degree:

Name of School: _____

School Location: _____

Desired Certificate/Degree: _____

Are you presently enrolled: Yes _____ No _____

If yes, please indicate:

Anticipated year of graduation: _____

Full-time or part-time enrollment: _____

Estimate of projected expenses for coming year: _____

References

Please attach with this completed application letters of recommendation (minimum of one, maximum of three). One letter must be from a non-relative. References may include: teacher, professor, clergy, employers, co-workers, supervisors.

Self Appraisal

Please complete the self appraisal on the following page. Tell us your story!

I submit this application as a true statement of facts for your consideration.

Print Name

Signature

Date

Return this completed application with references and self appraisal to:

Tricia's Scholarship Fund
c/o VNA Foundation
2401 Valley Drive
Valparaiso, IN 46383
219-462-5195

Please return by January 13, 2017

