SOUTHERN MID-ATLANTIC NNCA SCHOLARSHIP RECIPIENTS

2007
Courtney Crumpton  University of Virginia

2008
Nneka Okoye  Thomas Jefferson College

2009
Tierra Veney  University of Virginia

2010
Camille Crump  Hampton University

2011
Lindsay Nordstrom  Shenandoah University

2012
Conrad Simon  University of North Carolina, Chapel Hill

2013
Bethany Bovier  James Madison University

2014
Jayne Green (SMANNCA)  North Carolina Central University
Christine Ruff (MIMG)  Liberty University

2015
Rachel L. Fisk (SMANNCA) James Madison University
Camile Cogburn (MIMG)  UNC, Chapel Hill

Enclosure (1)
SOUTHERN MID-ATLANTIC NAVY NURSE CORPS ASSOCIATION GUIDELINES

Scholarship-A scholarship is being offered to undergraduate nursing student to continue their studies for a baccalaureate degree in nursing or for students who have a non-nursing baccalaureate degree and are pursuing a master in nursing as ENTRY level into the profession. Recipients of scholarships will be selected by the Southern Mid-Atlantic Navy Nurse Corps Association (SMANNCA) Scholarship Committee.

Applicants:
1. Must be enrolled in an NLNAC or CCNE accredited nursing program
2. Must be a Virginia or North Carolina College/University
3. Must be a Nursing Major
4. May be a full or part time student
5. Must have a current grade point average of at least 3.0 on a 4.0 scale
6. Must give evidence of successful COMPLETION of at least one CLINICAL nursing course

Application-Applicants must submit a completed application form on or before the due date. Any additional data and/or comments that support the application are strongly encouraged. Only COMPLETED applications (including references and transcripts) will be accepted, which includes signatures on all signature lines. Attached reference forms MUST be completed and returned. Incomplete materials will not be considered.

Applicants for scholarships for the Baccalaureate Degree or MSN (basic entry into practice) must submit:
1. Completed application form
2. OFFICIAL transcript from current program and other college/university transcripts
3. Two professional nursing references (mailed directly to below address). One must be from a faculty member. If two are not received, the package will be considered incomplete.
4. A personal statement of 500 words or less giving reasons you are qualified for the scholarship as well as how the scholarship will benefit you. Please include career goals and potential for contribution to the profession.
5. A completed Financial Assistance Questionnaire

Application deadline is March 27, 2016. Only applications received on or before the deadline will be accepted. Return completed application and all related documents in one mailing to:

Southern Mid-Atlantic NNCA
Scholarship Committee
c/o Carlos Torres
5713 Rossburn Court
Virginia Beach, VA 23455
SOUTHERN MID-ATLANTIC NAVY NURSE CORPS ASSOCIATION
SCHOLARSHIP APPLICATION FOR DEGREE IN NURSING
(Please type or print clearly)
***DUE NLT March 27, 2016**

Applicants Full Name: ____________________________
Last First MI (Maiden Name)
Home Address: ________________________________
Street City State Zip
Mailing Address: ________________________________
Street City State Zip
Phone (__) - ________________________________ EMAIL Address:

Education:
Current School: ________________________________ Date(s) of Attendance:
GPA (using 4.0 scale): __________________________ Anticipated Graduation Date:
Other Post High Schools Attended:
(include # credits and degree)

Official transcripts and proof of enrollment must be sent to:
SMANNCA Scholarship Committee
c/o Carlos A. Torres, Chairperson
5713 Rossburn Court
Virginia Beach, VA 23455

Employment Record: List in chronological order with present employment first.
Place Dates Position Part/Full Time

Use reverse side if necessary.

Community Involvement/Family Responsibilities:
Activity Place Position Hrs. Per Month Dates

Use reverse side if necessary.
Military/Civil Service Affiliation: (if any) # Years
Elaborate on your military affiliation.
Honors/Awards/Recognitions: (high school to present)
Honor Date

Use reverse side if necessary. Submit two (2) typewritten SIGNED professional references attesting to competency in nursing. (Please see attached form.)
I verify that all statements made in this application are complete and accurate.
Signature: ____________________________ Date: ____________________________

Endorsement (3)
SOUTHERN MID-ATLANTIC NAVY NURSE CORPS ASSOCIATION
SCHOLARSHIP REFERENCE FORM

Submit 2 professional SIGNED nursing references using the form below. **One must be from a faculty member in nursing.** Please print or type. The student or evaluator must return this form no later than 27 March 2016 (post marked). Late submissions will NOT be considered.

Candidate:

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
</tr>
</thead>
</table>

Address:

<table>
<thead>
<tr>
<th>Street</th>
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<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
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Name of Person Writing Reference:

<table>
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<tr>
<th>School/Institution/Business:</th>
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Position: Phone Number:

Address:

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<th>Street</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</thead>
</table>

How long have you known applicant? 
In what capacity?

Please address the following on a scale of 1-3 (3 being the best rating):

<table>
<thead>
<tr>
<th>Attitude</th>
<th>N/A</th>
<th>Good</th>
<th>Better</th>
<th>Best</th>
</tr>
</thead>
<tbody>
<tr>
<td>Character (Honesty/Integrity)</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>Competency_Performance</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>1. Clinical Application</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>2. Theory</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>Professionalism</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>Leadership</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>Management</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
<tr>
<td>Self-direction</td>
<td>N/A</td>
<td>Good</td>
<td>Better</td>
<td>Best</td>
</tr>
</tbody>
</table>

Please attach a typewritten narrative describing the candidate in light of your rating.

Signature: Date

Note: Please send this reference to: SMANNCA Scholarship Committee
c/o Carlos A. Torres
5713 Rossburn Court
Virginia Beach, VA 23455

Endorsement:
Scholarship Checklist

Applicant's Name: ________________________________

- Application Sheet
- Personal Statement
- Official Transcripts
- (1) Faculty Letter of Recommendation
- (1) Professional or Faculty 2nd Letter of Recommendation
- Financial Need Questionnaire

2016 Cycle

Note: There must be a TOTAL of TWO letters of recommendation per applicant.