

MOSALPN  
P.O. Box 105542  
Jefferson City, MO 6565110

## **MCPNE SCHOLARSHIP APPLICATION**

*For students currently enrolled (2017-2018) in a practical nursing program*

Thank you for your interest in the scholarship offered by the Missouri Council of Practical Nurse Educators. All fields must be completed for your application to be considered. Your application will receive consideration without regard to race, sex, national origin, age, or religion.

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Name, address, and phone number of the Practical Nursing Program in which you are enrolled:

\_\_\_\_\_

### **Financial Assistance:**

Please indicate your budgetary needs. Please use additional pages if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please state any personal or extenuating circumstances that would aid in the evaluation of your application. Please use additional pages if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I authorize the Missouri Council of Practical Nurse Educators to obtain any information related to my financial/educational records and release this information to those persons involved in the selection of scholarship recipients.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## **Criteria for Scholarships**

### ***The applicant must:***

1. Be accepted into or actively enrolled in a practical nursing program
2. Submit Free Application for Federal Student Aid (FAFSA) award letter with expected family contribution (EFC) with scholarship application.
3. Type, a 3 page essay with title page and references cited, on “The Scope of Practice of the LPN”. The selection committee will read these essays and select the top two, according to spelling, grammar, format, and references cited following APA format.
4. Currently maintain a cumulative grade point average (GPA) of 2.5 or greater based on 4.0 Scale. i.e. A= 4 B=3 or percentile (please provide range). All nursing courses must have a letter grade of “C” or above.
5. Obtain a letter of recommendation from the Nursing Administrator/Coordinator of the practical nursing program in which you are currently enrolled. By signing the letter of recommendation the Nursing Administrator/Coordinator verifies that the applicant meets all requirements of the scholarship. The letter of recommendation must be submitted with the application and essay before the deadline date.
6. All requirements for the scholarship are to be received by the selection committee chair by Thursday **March 15, 2018**.

## **Awarded Scholarships**

1. An award letter will be presented to the recipients. The scholarship check will be made payable to the recipients’ school with the students’ name on the memo line. The check will be mailed directly to the Nursing Administrator/Coordinator of the school. The monies will first be applied to the students’ outstanding balance with any remaining monies being awarded to the scholarship recipient. The scholarship monies should be used for educational expenses. *(If the scholarship monies are used for any other reason, the school shall provide the recipient a 1099 for the amount of the award)*
2. Up to two scholarships will be awarded. The recipient(s) will receive a \$500 scholarship.

### **Instructions for Submission**

Applications can be picked up from practical nursing program offices or downloaded from the MOSALPN website. Completed applications with all components should be forwarded to Vickie Smith at the Missouri State Association of Practical Nurse Educators, P.O. Box 105542 1103 Suite F Southwest Blvd. Jefferson City, MO 65109  
Digital Submissions may be sent to [mosalpn@centurylink.net](mailto:mosalpn@centurylink.net)