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**Association of Black Nursing Faculty**  
**NURSE IN WASHINGTON INTERNSHIP**  
**(NIWI)**

**Award Application**

**Recognizing Excellence in Nursing Academe**

**Administered by:**

**Association of Black Nursing Faculty Board of Directors**

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## Nurse in Washington Internship

### Purpose

Applications for the 2019 NIWI are now being accepted. The ABNF NIWI Award will support the attendance of one ABNF member at the 2019 Nurse in Washington Internship (NIWI) program, March 24-26, 2019, in Washington, D.C.

The highly regarded NIWI program is sponsored by the Nursing Organizations Alliance, a coalition to create a strong voice for nurses, teaches nurses how to influence health policy at the local and national levels.

Nurses visit Capitol Hill and acquire the skills needed to work with legislators to advance policies and agendas. Visit <http://www.nursing-alliance.org/content.cfm/id/niwi> for information about NIWI.

To apply for ABNF funding to attend the 2019 NIWI program, review the attached application packet and submit your application by January 17, 2019

### NIWI Objectives

Describe how nurses can be involved and influence policy at the local and national level.

Discuss how to work effectively with legislative staff to advance policy agendas.

Describe key steps to effect change in the legislative process.

Identify techniques to advance legislative issues at the grassroots level.

Identify legislative, political, and economic forces driving health care policy and delivery changes today.

Learn how to schedule Capitol Hill meetings.

### NIWI Learning Activities

Advocacy 101: Overview of Public Policy Process

Advocacy Training

Panel Session with Expert Nursing Advocates

Congressional Staff Panel Session

State Team Break Outs for Hill Preparation, including role playing Opportunity to meet with your Representative and Senators on Capitol Hill Networking with other nurses with similar clinical and political interests

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## ABNF NIWI Award Application

### Selection Process

- The ABNF NIWI Awards Committee, composed of members of the Board of Directors, will review all applications, and will select the award recipient, who must be a current ABNF member.
- The Awardee will be notified by mail on February 1, 2019
- The NIWI Award is to be applied to the next NIWI program following the award announcement
- The NIWI Award is given with the understanding that the same fees are not covered by any other source (i.e. employer, other organization or scholarship)

### Application Process

*The following materials must be submitted:*

- Completed and signed application. All applications are to be submitted electronically to the Chair of the Public Policy Committee, Dr Gloria J. McNeal – [gjmcneal@netscape.net](mailto:gjmcneal@netscape.net)
- Brief CV or resume no longer than three pages in length outlining professional background, publications, honors, awards, and committee service activities demonstrating political involvement
- One letter of reference from a professional colleague knowledgeable about the applicant's work in the political arena
- A one-page narrative statement that details the local, state, or national political activities that demonstrate an interest in governmental affairs and the political advancement of nursing. The narrative should include a description of how ABNF will benefit from the applicant's attendance at NIWI, and how the award will assist the applicant in attaining his/her professional goals and in contributing to the nursing academic community
- A one-page description of expectation of knowledge to be gained from the NIWI experience and how the applicant will apply that knowledge to the academic and other areas of the discipline of nursing. Include a description of how the applicant plans to disseminate the knowledge gained to the ABNF membership
- Type the entire application on the form provided. Handwritten forms or applications will not be accepted.
- The Applicant Information Form must be used. Do not retype. This form must be on the top of the application.
- Put the application packet together in this order
  1. Applicant Information Form
  2. Applicant one page narrative
  3. Applicant one page statement of expectation
  4. Applicant's three-page resume or curriculum vitae
  5. Letter of recommendation

### Submission Process

Applications must be received at the following email address **no later than 5:00 p.m. PDT on January 17, 2019:**

Chair, Public Policy Committee  
c/o Gloria J. McNeal  
[gjmcneal@netscape.net](mailto:gjmcneal@netscape.net)

Applications received will be logged and tracked by Chair of the Public Policy Committee. The applications will then be forwarded to the review panels for scoring. Incomplete applications will not be scored. The applicant will be informed by the Chair of the Public Policy Committee if an application will not be considered.

A letter of acknowledgement will be sent to all applicants. The Awardee will be notified by telephone and email if selected to be a recipient of the ABNF NIWI Scholarship Award. The award recipient will be presented with a plaque at the 2019 ABNF Annual Meeting and Scientific Conference

If you have any questions, please email Dr Gloria J. McNeal at [gjmcneal@netscape.net](mailto:gjmcneal@netscape.net)

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## ABNF NIWI APPLICATION CRITERIA

### 1. General Information

- a. Complete the ABNF Applicant Information Form
- b. List position title
- c. List applicant's degrees, date conferred, and schools attended (applicant must possess a minimum of a master's degree in nursing, or a related field)

### 2. One-Page Narrative Statement (35 points)

Description of how the applicant:

- a. has engaged in political activities
- b. will demonstrate how participation in the NIWI event will benefit ABNF
- c. will advance his/her professional goals and contribute to the nursing academic enterprise upon completion of the NIWI experience

### 3. One-page Statement of Expectation (25 points)

The applicant will:

- a. Describe the his/her expectation of the NIWI experience
- b. Explain how the knowledge gained from the NIWI experience will be applied to the nursing academe
- c. Describe plans for disseminating knowledge learned to the ABNF membership

### 4. Scope of Influence as Demonstrated by Curriculum Vitae (20 points)

Describe how the applicant has met the following criteria:

- a. served on local political boards (school, community, state, etc)
- b. received state or national recognition (this may include certification)
- c. presented or published

### 5. Letter of Recommendation (20 points)

Describe how the applicant has engaged in

- a. special projects
- b. public speaking
- c. political activities
- d. served in a consultant capacity outside of the institution where employed and how this has impacted health care

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## Post Award Requirements

### A. Travel Expense Reimbursement Procedure

All hotel and travel reservations are the responsibility of the awardee. The awardee will be reimbursed for all expenses incurred for: airfare, train, mileage, ground transportation, registration, hotel and meals.

**Reimbursement for this award will not exceed \$1500.00.** All requests for reimbursement must be submitted within 30 days of attending the March 2019 NIWI event. Expenses in excess of \$1500.00 will be the responsibility of the awardee.

### B. Final Report

Within 60 days following the NIWI event, the awardee will submit a Final Report to include:

- Project Objectives
- Description of How the Project Contributed to Applicant's Professional Goals
- Evaluation of Project Objectives and Measurable Outcomes
- Description of Plans to Disseminate Knowledge to the ABNF Membership
- Budget Expense Report
  - Travel
  - Hotel
  - Meals
  - Registration

**ASSOCIATION OF BLACK NURSING FACULTY  
NURSE IN WASHINGTON INTERNSHIP (NIWI) APPLICATION**  
(THIS FORM ***MUST*** BE USED)

**APPLICANT INFORMATION**

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Name and credentials listed as applicant wishes them to appear on his/her certificate.

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Home street address

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City, state, zip

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E-mail address

Phone numbers: (Home)

(Work)

**APPLICANT CURRENT NURSING EXPERIENCE**

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Current Employer

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Street Address

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City, State, Zip

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Position

E-mail address

Phone numbers: (Work)

**APPLICANT EDUCATIONAL HISTORY**

	<b>Institution</b>	<b>Dates Attended</b>	<b>Degree Received</b>
<b>Nursing Program</b>			
<b>College or University</b>			
<b>Graduate Program</b>			
<b>Other</b>			

I certify that I have met the criteria for eligibility and have submitted information that is correct to the best of my knowledge. I give permission to ABNF to use and duplicate my submitted materials for the purposes of review, conference proceedings, promotion and placement in ABNF files. If awarded funds by ABNF, I agree to submit a Final Report of the NIWI experience to be published in ABNF journals, website or other communication media.

Signature \_\_\_\_\_ Date \_\_\_\_\_