



Association of Black Nursing Faculty, Inc. Nursing Scholarship for Undergraduate Student

The purpose of the ABNF Nursing Scholarship for Undergraduate Student is to provide scholarship aid to professional nursing students.

Nursing Scholarship	Award Amount	Criteria	Use	Application Due Date
ABNF Nursing Scholarship for Undergraduate Student	\$500.00	1. Undergraduate Nursing Major 2. Member of ABNF at time of award 3. Junior or senior. Minimum GPA 3.0 4. Preference to student with commitment to service in the African American Community	Tuition, Books, Technology support for undergraduate nursing student	May 1st

Eligibility

The applicant must:

1. be currently enrolled in an undergraduate (BSN) Nursing program
2. be at Junior or Senior level in the nursing major
3. have minimum GPA of 3.0
4. have no current incomplete or failing grades
5. be a member of ABNF when application is received
6. be committed to service in the African American Community

Guidelines for submission

All applications must conform to the specifications outlined below:

1. **Submit a letter of support from a member of the Nursing program. i.e. Faculty, Nursing Advisor, Chair or Dean.** The letter of support must also include overall GPA and expected date of graduation. Additional information should include applicant's academic performance, participation and/or leadership in school activities.
2. **Explain in 500 words (one page) or less why you are a good candidate for the scholarship funds that you requested.** Key points to include: How you meet the criteria for the scholarship; your financial need; how the scholarship will impact your progress in the program; and what you hope to accomplish in nursing while serving the African American community. May also include your participation or leadership in school or community activities. This essay will weigh heavily in the committee's decision.
3. Submit all applications **electronically**. When submitting by e-mail, please include the following in the subject line of the e-mail: **ABNF Nursing Scholarship for Undergraduate Student Application.**

Application Deadline: Date May 1st

Please forward your documents to Dr. Karethy Edwards at edwardsk@fau.edu

Association of Black Nursing Faculty, Inc.
Nursing Scholarship for Undergraduate Student

Biographical Information

Student Name:	
Address: (City, State, Zip Code)	
Phone:	
Email:	
University/College Attending:	
Address: (City, State, Zip Code)	
Name of Chair/Dean of Program:	
Courses (credit hours) completed:	
Overall GPA:	
Expected Date of Graduation:	

Place a check mark before the following statements to indicate your financial needs.

_____ I am receiving some support (grants, scholarships, reimbursement from employer), but I have additional costs that are not covered.

_____ Besides a loan that I need to repay, I am receiving no support.

_____ Other, please explain

Explain in 500 words (one page) or less why you are a good candidate for the scholarship funds that you requested.

Key points to include: *How you meet the criteria for the scholarship; your financial need; how the scholarship will impact your progress in the program; and what you hope to accomplish in nursing and serving the African American Community. Additionally, may include your participation and/or leadership in school or community activities.*

This essay will weigh heavily in the committee's decision.

Statement of Agreement

I verify that the information provided is true and that I will be registered for at least 3 credit hours in the semester in which the funds will be awarded. I agree to comply with the specific goals and spending stipulations for the scholarship funds received.

Name Signed:		
Name Printed:	Date Signed:	