Kansas State Board of Nursing Undergraduate Scholarship Application Instructions

NEW DUE DATE

The Kansas State Board of Nursing (KSBN) Scholarships are one-time scholarships for students in pre-licensure nursing programs (professional or practical). Monies for the scholarships are donated by a KSBN partner, HealtheCareers, who produce the KSBN Newsletter. KSBN Scholarship winners are selected by Board members through a blind review of an essay written by the applicant. The essay topic is selected by the Board. Four scholarships for \$1000.00 each are awarded and are to be used for school expenses.

The completed application and essay must be postmarked no later than October 15, 2023. Winners of the scholarship MUST be present at the March 27, 2024 board meeting for presentation of the award. Scholarship essays and information should be sent to:

Kansas State Board of Nursing Attn: Nursing Scholarship 900 SW Jackson, Suite 1051 Topeka, KS 66612-1230

Eligibility Criteria

- Must be a resident of Kansas (not just in the state for school)
- Must be enrolled in a part-time nursing program or full-time in nursing courses at a Kansas college, university, or technical school
- Professional students must have a cumulative G.P.A. of 2.75
- Practical Nursing students must be in good standing in the program.

Application Instructions:

- Type or print (in blue or black ink) on the application form (if printed, it must be legible)
- Complete Sections A and B
- Give Section C to your program's nurse administrator, nursing program director, chair or dean, for their completion and submission by October 15, 2023
- Write an essay entitled: How has the nursing shortage impacted Models of Nursing Care?
- <u>Submit Sections A and B and the essay</u> to the Kansas State Board of Nursing, postmarked no later than <u>October 15</u>, 2023.
- All three sections (A, B, and C) must be received and postmarked no later than October 15, 2023 for the essay to be eligible for review

Essay Directions

- Type and double space, use 1-inch margins, use 12-point font
- Center title on the first page
- Number the pages
- **DO NOT** put your name on the essay. Attach the essay to Sections A & B
- Essay should include an introductory paragraph, supporting paragraphs (no more than 3), and the summary paragraph for a total of no more than 5 paragraphs or 2 pages.
- Use appropriate grammar, sentence structure, and paragraph structure
- Adhere to the assigned topic
- Be original in your ideas and focus

For Office Use Only: Essay Number: RN / PN_____

Kansas State Board of Nursing Scholarship Application Form

Section A: Identification Information Last Name: _____ First Name: _____ M.I.___ Maiden Name (if applicable): Street Address: City: _____ State: ____ Zip Code: _____ Home Telephone #: ()____-**Daytime Telephone #:** ()_____-Email address (required): ☐ Yes ☐ No Are you a resident of Kansas? Are you enrolled in a Kansas Nursing Program? Yes No Name of Nursing Program / School Applicant Signature Date Section B: Certification and Release of Information Applicant: Sign and date the certification and the authorization for release of information. I affirm that the information reported is complete, accurate, and true to the best of my knowledge. I have authorized nurse administrator, director, chair or dean of the nursing program to release the information requested to the Kansas State Board of Nursing for the purpose of determining eligibility for the Kansas State Board of Nursing scholarship. I understand that my essay may be published in the KSBN Newsletter. I understand that the application and essay must be postmarked no later than October 15, 2023. I understand that applications and essays postmarked after October 15, 2023 will not be accepted. Applicant Signature

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For Office Use Only: Essay Number: RN / PN
Section C: Part 1 Student Status Verification Release of Information Form
Applicant, please sign and give to the nurse administrator, director, chair or dean of your nursing program.
Applicant Last Name First Name
I authorize school officials to release the information requested to the Kansas State Board of Nursing for the purpose of determining eligibility for a Kansas State Board of Nursing scholarship.
Signature Date

For Office Use Only:	Essay Number	RN / PN
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Section C: Part 2

Student Status Verification

Completed by the nursing program

Nurse Administrator, Director Chair or Dean of the nursing program: Please complete this page and mail to:

Kansas State Board of Nursing, Attn: Nursing Scholarship Topeka, KS 66612-1230

All scholarship related information must be postmarked no later than	October 15, 202	<u>3</u> .	
Student Name			
School/Program Name			
Name of Program Administrator			
Student's beginning date in nursing program:		_	
Student's expected completion date for nursing program:		_	
Please indicate program type: BSN ADN	PN		
For <u>professional</u> nursing program student: GPA			
For <u>practical</u> nursing program student: In good standing?	Yes		No
Student is in part-time or full-time program?	Yes		No
Student is a resident of Kansas.	☐ Yes		No
Program Administrator's Signature	Date		

For Office Use Only: Essay Number: RN / PN_____

Nursing Scholarship Essay Evaluation

Essay Topic: How has the nursing shortage impacted Models of Nursing Care?

Essay: RN / PN # _____

Category	Possible	Earned
Introductory Paragraph		
Introduces main idea and captures interest	5	
Supporting paragraph		
Develops the main idea of the essay	15	
Essay has flow and readability	5	
Summary Paragraph		
Summarizes or restates main idea of essay using strongest points that support the main idea	5	
Impact	15	
Originality of idea or focus	5	
Grammar/spelling/format	5	
Adherence to assigned topic	5	
TOTAL	60	

Reviewer's Initials	Total Points
(Board members revie	w the essay and use this form to score the scholarship essay.)