Kansas State Board of Nursing Undergraduate Scholarship
Application Instructions

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 the Arthur Davis Agency, Cedar Falls, Iowa. The Arthur Davis Agency prints 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 November 30, 2019. Winners of the scholarship MUST be present at the March 25, 2020 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
- 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
- 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
- Write an essay entitled: What Does Professionalism in Nursing Mean To You?
- Submit Sections A and B and the essay to the Kansas State Board of Nursing, postmarked no later than November 30, 2019.

Essay Directions
- Type and double space, use 1-inch margins, use 10- to 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

If you have questions, email janelle.martin@ks.gov or call Janelle Martin, MHSA, RN at (785) 296-5036.
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): __________________________________________________________

Are you a resident of Kansas?   ☐ Yes ☐ No
Are you enrolled in a Kansas Nursing Program?   ☐ Yes ☐ No

Name of Nursing Program

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 November 30, 2019. I understand that applications and essays postmarked after November 30, 2019 will not be accepted.

Applicant Signature       Date

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
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
900 SW Jackson, Suite 1051
Topeka, KS 66612-1230

All scholarship related information must be postmarked no later than November 30, 2019.

__________________________________________________
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 professional nursing program student: Grade Point Average ______.

For practical 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
Nursing Scholarship Essay Evaluation

Essay Topic: **What Does Professionalism in Nursing Mean to You?**

Essay: RN / PN  # _______

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

Reviewer’s Initials ___________________________ Total Points __________

(Board members review the essay and use this form to score the scholarship essay.)