

## School of Nursing Scholarship Application

Student Name	UD ID#				
<ol> <li>Select the Scholarship(s) for which</li> </ol>	you are applying:				
Traditional BSN Students ONLY					
Helen E. Bancroft Scholar	rship (interest in maternity nursing)				
Florence Bayuk Memoria	Florence Bayuk Memorial Scholarship (must be a graduate from Christiana HS)				
AI DuPont Hospital Schol	Al DuPont Hospital Scholarship in Nursing (interest in pediatric nursing)				
KL Esterly Nursing Educat	KL Esterly Nursing Education Scholarship (committed to a pediatric nursing career)				
Drs. Pia and Galicano Ingu	Drs. Pia and Galicano Inguito Nursing Scholarship (For sophomore or junior students)				
Ines Monica Taylor Nursir	ng Scholarship (For African-American or Latino students)				
Accelerated BSN Students ONLY					
Patricia and Edwin Fleck	Patricia and Edwin Fleck Scholarship				
Helene Fuld Health Trust	Scholarship				
RN-BSN/RN-MSN Students ONLY					
Blue Cross/Blue Shield o	Blue Cross/Blue Shield of Delaware (Must be an ADN graduate from DTCC)				
Dr. Betty J. Paulanka Sch	nolarship (For Pennsylvania residents only)				
Accelerated, RN-BSN/RN-MSN or MSN Stu	dents ONLY				
Frances M. Cahn Scholar	Frances M. Cahn Scholarship (For Pennsylvania residents only)				
Kittleman Public Health	Kittleman Public Health Nursing Scholarship				
Linda Brinton Harra Scho	olarship				
Muriel Gilman Scholarsh	ip for Returning Nursing Student				
Zeneca Scholarship (For	Delaware residents ONLY)				

2. Student Information:						
Last Name First		-			<u> </u>	
	MI UD ID #			#		
Local Address		City		State	Zip	
Permanent Address	<u>-</u>	City	_			
Home Phone	Cell Phone		-	Email Address		
Program Type:	(Trad/Accel/RN-BSN/Other)					
Cumulative GPA:						
Anticipated Graduation Date:	mm/20YY					
Have you filed a FAFSA form?	Yes	No		_N/A		
Application Date:						

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<b>3. Short Essay:</b> Please list your qualifi	ications and why you should receive this lease submit your resume with your application.
<ol> <li>Funding Sources: List other fundir to help pay your program costs. (red)</li> </ol>	ng sources and amounts you are currently utilizing
Funding Sources	Funding Amount
	Total

## 5. DUE DATE: Completed application materials (see below) must be emailed to Zack Jackson, <u>zjackson@udel.edu</u> by May 15<sup>th</sup>.

Completed Scholarship Application including Short Essay.

Make sure to list all funding sources and amounts which are currently being utilized to help with program costs.

Resume-including work experience, internships, extracurricular activities and volunteer work.

Please review all special requirements and only submit applications for which you have met the criteria.

For questions, please email Zack Jackson at **zjackson@udel.edu**.