



Frances Tribe Memorial Nursing Scholarship

Purpose: To assist with college tuition for students planning to obtain a Nursing Degree from Clark College.

Eligibility: Students selected to receive the scholarship must:

- Have completed all of their prerequisites prior to being accepted into the Nursing Program.
- Have been accepted into Clark College's Nursing Program or currently be enrolled in Clark College's Nursing Program

The scholarship may be awarded for each of the two years of the nursing program, and is based on satisfactory academic progress/successful achievement of course requirements. Please note that previous recipients of this scholarship must reapply each year to be eligible for consideration. Preference will be given to previous recipients.

Deadline: **April 30, 2012.** Original application packets and four complete sets of application materials must be mailed or delivered to:

The Community Foundation for Southwest Washington
Frances Tribe Memorial Nursing Scholarship
1053 Officers Row
Vancouver, WA 98661

Before the final award is made, if requested, the applicant must be willing to meet with the Frances Tribe Memorial Nursing Scholarship Advisory Committee and/or a representative of the Community Foundation for Southwest Washington.

Amount: Amount varies each year. Minimum \$1,000.00 for each of the two years of the Nursing Program

SECTION A - GENERAL INFORMATION

Name _____

Permanent Mailing Address: _____

City _____ State _____ Zip Code _____

Telephone Number: _____ E-Mail Address _____

Date of Birth: _____

Father's Name _____ Living: Yes _____ No _____

Occupation _____ Employed: Yes _____ No _____

Mother's Name _____ Living: Yes _____ No _____

Occupation _____ Employed: Yes _____ No _____

Do you live with your parents? Yes _____ No _____

If not, with whom? _____

How many in your family, other than you, will be in college next year? _____

Information about all family members attending school. Please list the following:

<u>Name</u>	<u>Age</u>	<u>School Attending</u>	<u>Yearly Tuition (if any)</u>
_____	_____	_____	_____
_____	_____	_____	_____

List your school and community activities (such as sports, clubs, and volunteer services)

SECTION A - GENERAL INFORMATION (Continued)

List scholarships and financial aid you are applying for (or have applied for) and amount of each. Also, please include Work/Study and student and parent loans.

List Name of Scholarship, Grant or Other Type of Financial Aid	Received? Yes or No	Amount	If not yet received, date you expect to be notified of decision

Unusual Circumstances: Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

SECTION B – CLARK COLLEGE NURSING PROGRAM INFORMATION

Expected annual tuition costs: \$ _____

Books: \$ _____ Lab and Material Fees: \$ _____

Will you have additional costs directly related to the Nursing Program? If so, please explain:

Have you completed the required prerequisites for the Nursing Program? Yes____ No____

Have you been accepted into the Nursing Program? Yes _____ No _____

Are you currently enrolled in the Nursing Program? Yes _____ No _____

Which quarter will you be entering in Fall 2012? _____

Start Date of Fall 2012 quarter: _____

SECTION C - WORK EXPERIENCE

Work Experience: Describe your work experience during the past four years. Indicate dates of employment for each job and approximate number of hours worked each week. List amounts earned at each job.

Employer/Position	From – Mo/yr	To – Mo/Yr	Hours per Week	Amount Earned

SECTION D - ATTACHMENTS

- ◆ A maximum two-page essay (double-spaced, 12-pt. font preferred) in which you tell us about your desire for furthering your education, your career goals and any special interests you may have, and why you should be awarded the scholarship. Include a recent self photo, if possible.
- ◆ An official, sealed copy of your high school or college transcript. (*Online transcripts will not be accepted*).
- ◆ A copy of the college’s standard fee schedule for the upcoming quarter. If not yet available, provide current year’s fee schedule.
- ◆ Two letters of reference; one from a current or previous employer, or immediate or extended family members. If currently enrolled in the Nursing Program, a letter from Nursing Program staff is required. All letters must be addressed to the Frances Tribe Memorial Nursing Scholarship Committee.
- ◆ IRS Form 1040 (pages 1 & 2) for the previous year, from the person claiming the applicant as a dependent; **OR** a complete copy of applicant’s FAFSA Form (Free Application for Federal Student Aid).
- ◆ A brief written statement from a parent or guardian, if applicable, generalizing your financial status. Will your parents be helping to finance your future education?
Yes_____ No_____

SECTION E - CERTIFICATION

I acknowledge decisions of the Scholarship Advisory Committee and the Community Foundation for Southwest Washington are final and that this is a competitive selection process.

I certify that the information provided is complete and accurate to the best of my knowledge. I understand that intentional misrepresentation is cause for disqualification of the **Frances Tribe Memorial Scholarship**. I understand that the scholarship advisory committee shall review information on this form and all attachments, and, if asked, I agree to provide proof of information I have given on this form.

I give permission for the scholarship committee to contact my references and school officials for additional academic or character reference information.

If selected to receive a scholarship, I give permission for a publicity release, including the use of my name and photographic image.

Applicant's Signature _____ **Date** _____

Original application and supporting materials and four copies of complete packets must be sent or delivered to:

The Community Foundation for Southwest Washington
Frances Tribe Memorial Nursing Scholarship
1053 Officers Row
Vancouver, WA 98661

What happens after I send in my application?

Information from the application and attached materials is reviewed. The scholarship advisory committee selects recipient and an award letter is mailed soon after they are identified. Applicants not selected to receive a scholarship are also sent written notification.

This application becomes the property of the Community Foundation for Southwest Washington and will not be returned (it is recommended that you keep a copy for your files). All information will remain confidential.

If you have questions, please contact:

Anne Digenis
Donor Services and Grants Officer
Community Foundation for Southwest Washington
360.694.2550 or anne@cfsww.org