

ANGIE CIMINO MEMORIAL SCHOLARSHIP
Sponsored by the Native American Nurses Association (NANA)
Fall 2019 Scholarship application



The Native American Nurses Association (NANA) is proud to recognize a founding member of NANA and announce our annual Angie Cimino Memorial Scholarship. NANA will announce Scholarship awards of up to \$1000 on November 1, 2019. The deadline for applications is October 26, 2019.

PURPOSE:

NANA provides scholarships to assist eligible Native American Nursing students in their pursuit of higher education. Students who meet the eligibility requirements below may apply.

ELIGIBILITY:

- Enrolled member of a federally recognized tribe. Proof of tribal enrollment required.
- Possess a minimum of 3.0 GPA. Copy of current transcript required
- One letter of recommendation from an advisor, instructor, clinical preceptor, NANA member, or applicant's employer endorsing the applicant as a qualified candidate for scholarship.
- Accepted into a professional nursing program. Acceptance letter required. (Must be in upper division courses at the Junior or Senior level with nursing pre-requisites completed)
- Must be attending nursing school in the Phoenix Metropolitan area.
- Must be a NANA member

APPLICATION PROCESS

- Award cycle: Fall 2019
- Please type or print legibly
- Application must be emailed, hand delivered, or postmarked by: October 26, 2019
- Your application must contain the following documents:
 - Completed scholarship application
 - Personal Statement
 - Letter of recommendation
 - Current academic transcript
 - Proof of tribal enrollment
 - Acceptance letter to a nursing program in the Phoenix metropolitan area
 - NANA membership application if not already a member

APPLICATION DEADLINE: Must be emailed, hand delivered, or postmarked by October 26, 2019

<http://nanaaz.org>

4212 N 16th St Phoenix, AZ 85016

Rev: 20190815

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Name: _____

Current address: _____

Permanent address: _____

Phone#: _____ Secondary phone#: _____

Personal email: _____ School email: _____

Tribal affiliation: _____

Education history:

High school: _____ Location: _____ Graduation year: _____

College: _____ Location: _____ Dates attended: _____

College: _____ Location: _____ Dates attended: _____

Year in program: _____ Program of study: _____

Degree sought Associates degree Bachelor's degree

NANA will review applications and score applicants on their credentials, letter of recommendation, and personal statement.

Please attach your personal statement to this application. Share your vision on how you will contribute to the health of Native American communities and why you chose to pursue a career in nursing.

If selected I agree disagree to have my name, photo, and school affiliation published by NANA.

Incomplete applications will not be accepted or reviewed

Applicants signature _____ Date: _____

FOR MORE INFORMATION PLEASE CONTACT:

Sandy Champagne at waltersonlygirl@hotmail.com

Applications to be mailed to the NANA address listed below.