
*Carolyn Scott "Spirit of Excellence" Scholarship
and
Foundation Graduate Scholarship*



2016 Award Criteria & Application

1. A scholarship is available to candidates seeking a **Masters or PhD degree** and will be used for tuition, fees and supplies only.
 - a) **Carolyn Scott Memorial Scholarship – \$7,500** scholarships will be awarded to **eight** individuals in 2016.
 - b) **Foundation Graduate Scholarships – \$5,000** scholarships will be awarded to **four** individuals in 2016.
2. Scholarship recipients will be selected and notified no later than April 25, 2016.
3. Upon submission, all applications **MUST be typed** and include the following:
 - a) an outline of the applicant's future educational plan
 - b) personal goal
 - c) validated registration in an accredited program
 - d) three letters of recommendation, including:
 - *One letter from a supervisor*
 - *One letter from a co-worker*
 - *One letter from a former patient*
4. **Applications must be received in the Foundation Office, 8401 W. Dodge Rd, Suite 225 by Tuesday, March 1 at 3:00 p.m.**

NOTE: *Applications received after this date will not be accepted as they cannot be processed in time to be reviewed by the Scholarship Committee.*

5. Eligibility:
 - a) Registered nurses working in Nebraska Methodist Health System a minimum of 12 hours per week for the past two years.

NOTE: Recipient must maintain these hours or forfeit the scholarship.
 - b) Continuing interest in Nebraska Methodist Health System and the nursing profession.
 - c) Open to any registered nurse employed as a staff nurse or supervisory personnel.
 - d) Caring qualities including:
 1. empathy
 2. genuineness
 3. sensitivity to patient needs
 4. effective communication skills

- e) Academic excellence.
- f) Leadership potential.
- g) Performance record indicating individual as a role model among nurses.
- h) Intention to begin use of Scholarship in academic year 2015-2016.

NOTE: If you are part of the Nursing Academy you are not eligible to apply.

7. All recipients of scholarships will be asked to indicate (*by September of the year in which they are selected*) that they are actively enrolled in a graduate educational program
OR
forfeit that scholarship to a recipient who was not elected but can proceed with his or her education.
8. All monies are encouraged to be expended within a two year period by scholarship recipients. All recipients must continue to work at least 12 hours while they receive the scholarship.

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Award Application

*Application must be typed. Please use this MSWord document and fill in the form fields.
(The fields will increase in size as needed)*

Applicant Name:

Daytime Phone Number:

Address:

City:

State:

Zip:

School(s) Attended:

Class of:

Class of:

Degree(s) Attained:

Year:

of years employed at Nebraska Methodist Health System:

Employment History *(please include dates and locations):*

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-
-
-

School to which application will be made:

The year you expect to graduate:

Degree to be pursued:

Personal Goal: (Minimum one page typed and on a separate sheet)

*What do you expect to do with the additional education and/or training that you plan to pursue?
How will this addition education and/or training help Methodist Health System? Please use this
opportunity to also tell us about yourself – your path to becoming a nurse, your experience as a
nurse to this point, and your future as a nurse.*

Outline your educational plan: (Must be typed on a separate sheet and provide details)

*All Spirit of Excellence Scholarships will be for Graduate work, including Nurse Practitioner
programs if a Masters degree is a prerequisite.*

Applicant Signature: _____

Three letters of recommendation must accompany this application as follows:

1. One from a supervisor: (Please see following page for letter criteria)
2. One from a co-worker: (Please see following page for letter criteria)
3. One from a former patient: (a former patient letter is required)

NOTE: *If you are applying for both the Carolyn Scott Spirit of Excellence Award and the Ruth
Freed Leadership Scholarship you must submit different recommendation letters as the criteria
differs.*

Criteria for Recommendation Letters

The following items must be included in the recommendation letters from the supervisor and co-worker in order to be considered.

1. Performance record indicating individual as a role model among nurses:
 - a) examples of the applicant's accomplishments
 - b) quality improvement outcomes
 - c) staff engagement and satisfaction
 - d) work history and performance record
 - e) role and responsibilities
2. List committees and organizations the applicant is involved in
3. Leadership potential
4. Caring qualities:
 - a) empathy
 - b) genuineness
 - c) sensitivity to patient needs
 - d) effective communication skills
5. Reasons applicant is a strong candidate to receive this scholarship

Application Packet Requirements

No application will be considered if the applicant does not include each of the following items. Please submit all materials together.

- Complete personal information on first page of application
- Personal goal (minimum one page and typed on a separate sheet)
- Outline of education (typed on a separate sheet with details)
- Provide validated registration in an accredited program (letter from school confirming you have been accepted or a list of your upcoming classes)
- Letters of recommendation (must have one of each)
 - a) Supervisor(meets criteria for recommendation letters)
 - b) Co-worker(meets criteria for recommendation letters)
 - c) Patient

If you are unable to meet these requirements please contact Elizabeth Borisow at the Foundation at 402-354-4899. **Applications must be received in the Foundation Office, 8401 W. Dodge Rd, Suite 225 by Tuesday, March 1 at 3:00 p.m.**