

## WSGNA Educational Scholarship Application (Fall)

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WSGNA Educational Scholarships have been established to financially assist WSGNA members in attending SGNA/WSGNA educational courses. Scholarships will be awarded as outlined in the scholarship policy and procedure.

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Member since \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email address \_\_\_\_\_

Title \_\_\_\_\_ Position \_\_\_\_\_

How long have you been a GI Nurse/associate? \_\_\_\_\_

Are/Have you been involved in GI Nursing in your hospital/community/state/regional or national organization? \_\_\_\_\_

Have you ever received a WSGNA scholarship before? When? \_\_\_\_\_

What would a scholarship mean to you; any special considerations? \_\_\_\_\_

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The number of scholarships and the amount of each scholarship granted will be determined by the Board of Directors and Scholarship Committee in December of each year.

Please indicate below which course you are applying for: (The **application deadline for the following scholarships is September 1 of the year to be awarded**)

\_\_\_\_ WSGNA Fall Education Course

\_\_\_\_ Multi Regional Conference

\_\_\_\_ Scholarship for \_\_\_\_ Certification \_\_\_\_ Recertification (2 each, selected annually in September)

**Selection criteria:**

\*\*A member of WSGNA for one year or more as of January 1st of the year you are seeking the scholarship.

\*\*Currently working in the field of GI.

The monies for the scholarship will be reimbursed upon the submission of a copy of your contact hour certificate, a brief synopsis of your experience at the educational course and how attending enhanced your professional career. This is due within 30 days of attendance and will be published in the newsletter.

Contact any board member if you have questions.

**Submit to: Director at Large, Nominations and Membership**