

TSNO Education Scholarship Guidelines and Application

Purpose

Improve school nursing by assisting current licensed nurses to pursue advanced education at an approved School of Nursing

History

This scholarship is provided by funds TSNO has obtained from conference profits and other donations. TSNO has continued to budget and annually provide educational scholarships to TSNO members who are advancing their education within school nursing.

Award

1. Scholarship will be mailed to recipient and announced at the annual conference. The number of scholarships and amounts are based on available funds, as determined annually by the Finance Committee and approved by the Executive Committee.
2. Recipient name(s) will be communicated to the TSNO membership.
3. The scholarship amount will be up to \$1000 annually.
4. Current members of the TSNO Executive Board are not eligible for this scholarship.

Applicant Requirements

1. Current active member for the previous two years.
2. Current license as nurse in state of Texas.
3. Current full time employment in a school setting EC-12.

Applicant Responsibilities

- Demonstrate a serious intent to advance school nursing practice. Submit an essay (500 words or less) describing how your students and school system will benefit from your receipt of this scholarship.
- Submit Name as shown on Texas nurse license with the completed application.
- Submit written verification of current employment as a school nurse on district letterhead.
- Submit written verification of enrollment at an accredited School of Nursing or Advanced Education with focus in School Nursing.
- Submit transcript upon completion of course for which scholarship is intended.
- Submit completed application.

Judging

1. Scholarship Committee will make selection
2. The scholarships will not be presented if a qualified candidate is not identified.
3. The decision of the committee will be final and not open to appeal.

Application Deadline: October 15

Contact [TSNO](#) with questions.

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Texas School Nurses Organization, Inc.

819 W. Arapaho Rd., Suite 24B, #345

Richardson, TX 75080

Application Deadline: October 15th

Name: _____ Date: _____

Street Address: _____

City: _____ State/Zip: _____

Telephone: _____

E-Mail: _____

Applicant Responsibilities

- NASN/TSNO ID # _____ Member since _____
- Name as appears on Texas Nursing License: _____
- Submit written verification of current employment as a school nurse on district letterhead.
- Submit written verification of enrollment at an accredited School of Nursing or Advanced Education with focus in School Nursing.
- Submit transcript upon completion of course for which scholarship is intended.
- Submit completed application

Applicant Signature: _____

For Official Use Only:

Fund Number: _____

Fund Name: _____

Amount: _____