The mission of the Honor Society of Nursing, Sigma Theta Tau International, is to support the learning, knowledge, and professional development of nurses committed to making a difference in health worldwide. In order support this mission, the Epsilon Tau-at-Large Chapter is offering two $1000.00 scholarships to two deserving graduate nursing students.

**Eligibility requirements for the Graduate Nursing Scholarships are as follows :**

1. The applicant is currently accepted and enrolled in an accredited graduate nursing program.
2. The applicant must be a member of Epsilon Tau-at-Large Chapter of Sigma Theta Tau International.
3. The applicant must have a minimum GPA of 3.5 based on a minimum of 3 courses taken at the graduate level.

**The following documents must be received by October 15 :**

1. The scholarship application
2. An offical transcript of graduate work completed
3. A current copy of the applicant’s resume/CV
4. One letter of recommendation addressing the applicant’s level of professionalism and leadership potential. This letter should be completed by a faculty member or a professional associate and included along with the application.
5. A one to two page essay addressing your commitment to nursing, leadership qualities and professional goals.

Please send completed packet to:

Epsilon Tau-at-Large Scholarship

c/o Maddie Lacey

Division of Nursing

Rivier University  
420 South Main St.  
Nashua, NH 03060-5086

# Personal Information

Name:

Mailing Address:

Phone Number: (home) (cell)

Email Address:

# Education

**Undergraduate:**

Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of Graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Degree:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Honors/Awards:

**Graduate:**

Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated or Date of Graduation:

Degree to be Awarded or Awarded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associations/Memberships:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Graduate (only if needed):**

Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Date of Graduation:

Degree to be Awarded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associations/Memberships:

\_\_\_\_\_\_

9/16/13 revised