**Tau Kappa At-Large Chapter**

**Guidelines for Lifelong Learning Scholarships**

**I. Purpose of the Fund**  
The purpose of the Lifelong Learning Scholarship fund is to support continuing education among Tau Kappa At-Large (TKAL) members. Lifelong learning through continuing education is broadly defined and may encompass, but is not limited to, attendance at a nursing or inter-professional conference or meeting, completion of continuing education webinar(s) or online education, pursuit of national professional certification or renewal of certification, or enrollment in a master’s or doctoral academic program or post-graduate certificate program.

**II. Fund Sources -** General chapter funds as approved in the budget

**III. Processing Fund Monies**

* The Finance Committee of the Chapter recommends funds in the budget from the general fund or designated funds for awarding scholarships. This is approved and administrated by the Board of the Chapter.
* The Board of the chapter approves the recommendations of the TKAL Awards and Recognition committee and may allocate additional funds for scholarship on the basis of availability.
* The Awards and Recognition committee of the chapter is responsible for the program announcement and scholarship process. It accepts nominations/applications, reviews applications, and recommends the awarding of scholarships to the TKAL Board twice each year in spring and fall.
* The Chapter Treasurer is responsible for keeping a five-year record on all recipients of monetary awards. Information on recipients should include name and address, amount of award, how the person was selected and the criteria utilized.
* Monies allocated may be used to support continuing education that supports lifelong learning of TKAL members.

**IV. Criteria for Awarding Scholarships**

1. Applicant Criteria  
   1. Member of Tau Kappa At-Large chapter STTI for a minimum of one year.  
   2. Engaging in continuing education that supports lifelong learning of the TKAL member. Examples include:
   1. Matriculated in a master’s or doctoral academic program
   2. Enrolled in a post-graduate academic certificate program
   3. Registered to attend or present at a regional, national or international professional nursing or inter-professional conference
   4. Registered for continuing education webinar(s) or online education
   5. Registered for a national professional certification examination
   6. Renewal of national professional certification
2. Application
3. Submit an application, accompanying information, paid receipts, and a written statement of personal and professional goals anytime during the year after engaging in an educational activity.
4. Agree to provide a brief synopsis of how the continuing education activity has contributed to the TKAL member’s lifelong learning and excellence of the TKAL chapter.
5. Agree that the member’s name and synopsis maybe be published in the TKAL newsletter and/or in the Circle Discussion Forum.
6. Competitive basis for fund allocation
7. Quality of written goals
8. Scholarship fund budget and number of proposals submitted
9. Members who have not previously received a scholarship are given preference when multiple members apply and receive comparable reviews.

Selection and Notification

The Awards and Recognition Committee shall review the nominations/applications each March and September and present selected scholarship recipient(s) to the TKAL Chapter Board for consideration of awarding the scholarships.

The Tau Kappa Chapter Board shall approve scholarship recipients.

The Chapter Treasurer shall notify awardee(s) and shall send the scholarship award and congratulatory letter to the scholarship recipient(s).

The Awards and Recognition Committee shall publicize information about the scholarship recipient(s) in the Chapter newsletter and on the Tau Kappa At-Large Chapter website.

**V. Scholarship Allocation**  
The amount of a scholarship is determined by the amount of funds requested, the number of requests and the availability of monies in the chapter scholarship fund. Monies allocated may be used to support educational expenses. Scholarships will be awarded retroactively after completion of the educational activity.

**VI. Scholarship Application Deadlines**Completed applications with all receipts for the educational activity will be accepted continuously throughout the year.

* Applications received between August 1st and February 1st will be reviewed by the Awards and Recognition Committee in March.
* Applications received between February 1st and August 1st will be reviewed by the Awards and Recognition Committee in September.

**VII. Attachments**

A. Chapter Lifelong Learning Scholarship Application  
B. [Chapter Scholarship Agreement of Financial Expenditures](http://www.nursingsociety.org/Chapters/Resources/Documents/Samplechapterscholarshipfinancialagreement.docx)

**Tau Kappa At-Large Chapter**

**Lifelong Learning Scholarship Application**

**Date:**

# Personal Data

**Name:**

**Credentials:**

**Mailing address:**

**Telephone number:**

**Email address:**

# Education

**Undergraduate Institution(s):**

**Graduate Institution(s):**

**Current Professional Occupation/Employer:**

**Professional Associations/Memberships:**

**Tau Kappa At-Large STTI Membership Number:**

**Year of Tau Kappa At-Large Induction and/or Chapter Involvement:**

**Have you been the recipient of a Sigma Theta Tau International or Tau Kappa At-Large scholarship or award in the past? \_\_\_\_ Yes \_\_\_\_ No**

**If yes, please give the name, date and description of the award.**

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**Type of Continuing Education for the Lifelong Learning Scholarship Application**

**\_\_\_\_\_\_\_ Academic Education Degree Program**

**\_\_\_\_\_\_\_ Academic Education Certificate Program**

**\_\_\_\_\_\_\_ Organizational Conference or Meeting**

**\_\_\_\_\_\_\_ National Professional Certification Examination**

**\_\_\_\_\_\_\_ National Professional Certification Renewal**

**\_\_\_\_\_\_\_ Continuing Education Webinar(s) or Online Education**

**\_\_\_\_\_\_\_ Other**

**(Complete Applicable Section Below.)**

**Academic Education Information**

**Name of University or College: (provide link to website)**

**Degree or Certificate Program:**

**Date of Enrollment/Matriculation:**

**Date of Anticipated Graduation/Completion:**

**Current GPA or Final GPA of Last Attended Academic Program:**

**Provide copy of program acceptance/enrollment and course completion.**

**Conference/Meeting Information**

**Name of Conference/Sponsoring Organization: (provide link to website)**

**Conference Location and Dates:**

**If Presenting, Title and Type of Presentation: (e.g., podium, poster, panel, symposium, workshop)**

**Provide copy of conference registration.**

**Professional Certification Information**

**Name of National Professional Certification: (provide link to website)**

**Professional Organization Offering the Certification:**

**Certification Period:**

**\_\_\_\_ New Certification \_\_\_\_ Examination Date**

\_\_\_\_ **Renewal of Existing Certification**

**Provide copy of certification certificate.**

**Webinar(s) or Online Education Information**

**Name of the Educational Activity: (provide link to website)**

**Professional Organization Offering the Education:**

**Date of the Activity:**

**Provide details of the activity and copy of registration/completion for the activity.**

**Other Continuing Education Activity Information**

**Name of the Educational Activity: (provide link to website)**

**Professional Organization Offering the Education:**

**Date of the Activity:**

**Provide details of the activity and copy of registration/completion for the activity.**

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**Other Funding Sources**

**Have you or will you receive any other scholarship, sponsorship or funding for this educational activity? \_\_\_\_Yes \_\_\_\_No**

**If yes, please explain.**

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**Personal/Professional Goals for Lifelong Learning**

**Statement of personal and professional goals for participation in this continuing education activity. (Limit to 200 words).**

**IMPORTANT:**

**Attach all receipts related to the cost of the educational activity for which you are seeking reimbursement.**

**Tau Kappa At-Large Chapter**

[**Scholarship Agreement of Financial Expenditures**](http://www.nursingsociety.org/Chapters/Resources/Documents/Samplechapterscholarshipfinancialagreement.docx)

The scholarship money awarded to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_ by the Tau Kappa At-Large Chapter STTI shall be designated as follows (specify exact usage or any restriction):

When applicable, the recipient agrees to provide a brief synopsis of the educational activity for the TKAL chapter newsletter and the Circle Discussion Forum.

Signed by:

Recipient \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

Chapter Treasurer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

Chair, Awards & Recognition Committee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_