



**West Central MN Oncology Nursing Society  
General Scholarship Guidelines & Application Instructions  
Revised January 2019**

- West Central Minnesota Oncology Nursing Society will award 8 scholarships per year for members. The purpose of these scholarships are to help support and encourage nurses to evolve their knowledge of cancer care in order to provide exceptional care for oncology patients.
- The monetary value for these scholarships will include:
  - OCN reimbursement after certification (Must provide copy of card)
  - 1 year of ONS membership reimbursement for new members
  - Grant/Research- \$500
  - Request for donation
  - Other: \_\_\_\_\_
- The application **deadline is within 6 months** of certification/membership attainment or within 2 **months** prior to project start date.
- Requirements:
  - a. You must be a registered nurse.
  - b. You must be an active ONS member.
  - c. You have not received this scholarship in the last calendar year.
  - d. You can only be awarded one WCMONS scholarship within a calendar year.
- The scholarships will be awarded to the top 3 members with the most points based on the following point system. In the case of a tie, an anonymous application review will be completed by the board.
- Point System
  - a. This system will be based off involvement from the last 12 calendar months.
  - b. Applicant is responsible for completing the points earned column

Category	Subcategory	Points Awarded	Points Earned	Example
Chapter Involvement				
	100% attendance at chapter meetings	2		
	50-99% attendance at chapter meetings	1		
	Presentation at local ONS chapter meeting	2 per each presentation with a 6 point maximum		
	Submission of an article for chapter newsletter	1 per each article with a 3 point maximum		
	Participation in chapter fundraising (e.g.,	3 per each project/event		

	community event)	with a 6 point maximum		
<b>Leadership</b>				
	Current WCM chapter office position held	3		
	National ONS office position held	4		
	Current OCN certification	2		
<b>Other</b>				
	Current position held in an Oncology department	1		
<b>Total Points</b>				

- For any questions or to submit your request, please mail or e-mail your completed application form to President Elect Kara Panek.

*\*All scholarships are subject to change upon discretion of the board and availability of funds.*



### WCMONS GENERAL SCHOLARSHIP APPLICATION

<b>Applicant Data</b>	<p><b>Name:</b></p> <p><b>Address:</b></p> <p><b>Telephone:</b></p> <p><b>E-mail:</b></p> <p><b>Employer:</b></p> <p><b>Position :</b></p> <p><b>ONS Member ID:</b></p>
<b>Which scholarship are you applying for?</b>	<p><input type="checkbox"/> <b>ONS reimbursement after certification-(Must provide copy of card)</b></p> <p><input type="checkbox"/> <b>ONS membership reimbursement for new members (one year dues)</b></p> <p><input type="checkbox"/> <b>Grant/Research- up to \$500</b></p> <p><input type="checkbox"/> <b>Request for donation</b></p> <p><input type="checkbox"/> <b>Other: _____</b></p>
<b>Program Information</b>	<p><b>Program Name:</b></p> <p><b>Program Date:</b></p> <p><b>Amount of Funding Requested:</b></p>
<b>Application Questions</b>	<p><i>Please complete the following questions thoroughly and accurately.</i></p>
	<p><b>Please describe the grant/research or request for your donation.</b></p>

	<p><b>Have you received this scholarship before? If yes, when was the last time you were awarded this scholarship? Have you received any other WCMONS scholarships within the last 12 calendar months?</b></p>
	<p><b>Describe your participation, length of membership, and role in the WCMONS Chapter?</b></p>
	<p><b>Please state what other resources of monetary supplement you have toward this expense?</b></p>
	<p><b>How will this scholarship enhance your nursing role?</b></p>



	<b>How will you share back to the members of the WCMONS chapter of this opportunity?</b>
	<b>Is there anything else you would like to share with the board?</b>