



VIRGINIA ASSOCIATION OF SCHOOL NURSES, INC.
P.O. BOX 28313, RICHMOND, VA 23228

VASN CONTINUING EDUCATION SCHOLARSHIP

PURPOSE

Improve Virginia school nursing by assisting registered nurses employed in Virginia schools to further their nursing education for credit toward a higher degree.

ELIGIBILITY

- Attend an accredited school of nursing to work toward a degree in nursing**
- Currently employed as a school nurse with at least one year employment as such
- Employed as a school nurse at the time the award is made
- Present significant need
- Current active member of the Virginia Association of School Nurses
- Complete the application
- Meet the deadline for the application

** Priority will be given to applicants who are pursuing a course of study leading to the BSN degree.

If no applications are received for this level of study, applicants who are pursuing a higher degree in nursing (e.g., MSN, Nurse Practitioner certificate) will be considered.

AWARD

After the VASN Elected Board has approved the selection of this continuing education scholarship, a \$250 scholarship will be announced at the annual VASN conference. The award will be mailed to the recipient's home address. All decisions made by the Elected Board shall be final and not open to appeal.

APPLICATION DEADLINE

Send applications to: VASN Award Committee c/o Hope Luong, President-elect Designee/Award Committee Chair, at hope_luong@yahoo.com on October 5th.

CONTINUING EDUCATION SCHOLARSHIP APPLICATION

Applicant's Name: _____

Applicant's Home Address: _____

Telephone: (Home) _____ (Work) _____

Employer: _____

Employer's Address: _____

VASN/NASN Member Number: _____ **VASN Region:** _____

Total Years Employed as School Nurse: _____

Name of School/College/University Where Currently Enrolled to Achieve Degree:

Student Status: Full Time Part Time **Projected Degree Completion Date:** _____

Application for Academic Years: 20__ to 20__ **Semesters:** Fall Spring Summer

Number and Relationship of Dependents: _____

Proof of Enrollment in a Program of Study: Attach evidence of this with the application.

Statement of Need: Attach a brief statement that explains your need for this scholarship and how this education will improve your school nursing practice.

My signature below substantiates that the information provided herein is true and factual.

Signature: _____ **Date:** _____

Submit Applications Electronically to: VASN Award Committee c/o Hope Luong, President-elect Designee/Award Committee Chair, at hope_luong@yahoo.com on October 5th.