This program is designed to assist MONL members in obtaining an educational degree to advance their skills and expertise in contemporary practice. Scholarships may be used for tuition, books or research expenses.

**Administrative Guidelines:**

The MONL-District 1 scholarship program will be administered by the Board. Allocation of funds will be determined during the budgeting process each year.

Applications must be completed and submitted by August 15 of each year to the Chairman of the Scholarship Committee.

Scholarship Committee chair and an ad-hoc committee of the Board will review all applications for eligibility and selection requirements.

Board members who have applied for a scholarship will be excused during the selection process.

Notification of awards and disbursement of scholarship money will occur by September 30 of each year.

A scholarship applicant may apply for a one-year renewal of the scholarship if selection criteria and eligibility are met.

**Verification of the Scholarship funds being utilized for intended purposes may be required.**
MONL-DISTRICT 1 EDUCATION SCHOLARSHIP PROGRAM

This program is designed to assist MONL members in obtaining an educational degree to advance their skills and expertise in contemporary practice.

AWARD

The number of, and award amount will be determined each year in conjunction with budget planning. In 2020, two (2) scholarships for $2000 each will be awarded.

These scholarships may be used for:

❖ BSN completion
❖ MSN or related Masters’ Degree program
❖ PhD, DNP or other doctoral program

ELIGIBILITY

You must be:

❖ A current MONL member
❖ Currently enrolled or have proof of acceptance for this term in a nursing or related degree program
❖ Have a minimum of a 3.0 grade point average in current academic work
❖ MONL Board members are eligible to apply for a scholarship.

APPLICATION PROCESS

A completed application consists of the following components, typewritten and submitted together. All applications must be complete to be considered for selection.

❖ Complete Application form. Describe your activity with MONL, including years of membership and participation (attendance at meetings, Committee or leadership roles, involvement in Advocacy Day, etc.)
❖ One typewritten page indicating your educational and career goals upon attainment of this degree. Explain why this degree will facilitate your professional goals.
❖ Include a statement indicating how the money will be used.
❖ CV including your educational background, professional experience, honors and awards, involvement in professional and community organizations.
❖ Official transcripts of all course work completed in the current program. If the applicant is enrolled but has not started course work, submit proof of acceptance into the program.
Two (2) letters of recommendation-representing at least one of the following

- Faculty member
- MONL member
- Employer
- Colleague from work or school

Two letters must be submitted. Individuals should use the Recommendation Form included in this packet.

**Mail/email your application to:** Rochelle Igrisan RN MSN; Chair-Scholarship Committee; 1430 Greenview Drive, Ann Arbor, MI 48103. **Email:** igrisanr@gmail.com
MONL SCHOLARSHIP APPLICATION

Name
Home address
City, State, Zip
Contact phone number

Position Title  
Years in Position

RN License Number and State  
Expiration date

MONL Activity

Academic Background

List all schools attended post-high school (most recent first) and degrees granted or attach CV

Sign and date application

4/2020
RECOMMENDATION FOR MONL EDUCATIONAL SCHOLARSHIP CANDIDATE

Name of Applicant: _______________________________________

By signing this form, I waive my right to review this document: ______________________________________________________

Signature of Applicant

To the Recommender:

The applicant listed above has selected you as a reference for a Michigan Organization of Nurse Leaders (MONL) scholarship. The scholarship is to assist MONL members in obtaining a degree and advancing their skills and expertise in contemporary practice. We are interested in obtaining information you think would be helpful in assessing this candidate’s qualifications for the scholarship. This recommendation will be held in strictest confidence. Upon completion of the application process, this letter will be destroyed.

Please rank this candidate on each of the following items

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<th></th>
<th>Outstanding</th>
<th>Average</th>
<th>Below Average</th>
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<tbody>
<tr>
<td>Perseverance in pursuing goals</td>
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<tr>
<td>Seeks professional development</td>
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<td>Creativity</td>
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<td>Demonstrates leadership potential</td>
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<td>Communication skills</td>
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<tr>
<td>Analytical/Problem-solving skills</td>
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</tbody>
</table>

Describe the applicant’s strengths in relation to their scholarly or creative potential

In what areas will this candidate need to strengthen their skills or abilities?
Indicate in what capacity you know this applicant
__MONL member  __Employer  __Advisor/Faculty  ___Other (please explain) _____________

How long have you known the candidate? ______________

Recommendation

___Highly Recommend
___  Recommend
___ Hesitate to recommend
___  Do not recommend

Name of respondent:
Title/Institution:

Please email this form to: Rochelle Igrisan, Scholarship Committee Chair,
igrisanr@gmail.com

4/2020