

August 15, 2011

TO: **Nurse Practitioner Students**  
FROM: **Scholarship Committee**  
**CANP-Sacramento Chapter**

**CANP-Sacramento Chapter** is offering a scholarship for NP students currently enrolled in a Nurse Practitioner Program. The purpose of the scholarship is to encourage local students to participate in their state and local professional organization. For NP's the state organization is the California Association for Nurse Practitioners (CANP). Sacramento is the local chapter of CANP.

To facilitate this endeavor we will pay the registration fees, lodging and travel expenses for the recipient to attend their California statewide NP meeting. The CANP conference will be held in March 2012. We will also pay one year's membership fees to CANP and the local chapter-Sacramento. \$1,000 maximum amount of award.

**Qualifications for Scholarship:** To be eligible for this scholarship, you must be a NP student, currently enrolled and in good standing in a California Nurse Practitioner program, due to graduate in 2011 or beyond, and be a student at the time of the conference. Prospective applicants must also live in the Sacramento chapter area. Our Region 6 catchment area includes Yolo, Placer, Solano, Sacramento, El Dorado, Amador and Alpine counties.

**Eligibility Criteria:** Applicants will be evaluated on the following criteria: Academics, GPA, Leadership, volunteerism, Professional goals and activities.

All of the following must be submitted for consideration:

By email:

1. CANP-Sacramento Chapter Scholarship Application Form
2. Letter of interest
3. Professional Goals Form

By mail (US Postal Service) if need be:

4. Proof of academic standing (Letter of good standing from school or copy of transcripts)

**Submit required forms to:**

CANP-Sacramento Chapter Scholarship Committee  
c/o [asoloway@sbcglobal.net](mailto:asoloway@sbcglobal.net)

or Mail proof to:

Ann Soloway FNP-BC, CANP-Sacramento Chapter, Scholarship Chair  
4601 Francis Ct., Sacramento, CA 95822

**Application Deadline:** All of the application materials must be submitted on or before **October 31, 2011**. Late entries will not be considered for review.

The scholarship will be awarded to the lucky recipient at the December 2011, CANP-Sacramento Chapter educational dinner meeting (TBA).

# CANP SCHOLARSHIP APPLICATION FORM

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street and Apt. #                      City                      State                      Zip

PHONE: \_\_\_\_\_  
(Primary): \_\_\_\_\_ (Other): \_\_\_\_\_

**Email address:** \_\_\_\_\_

Present  
Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Education:  
 Associate                       Baccalaureate  
 Graduate                       Diploma                       Other \_\_\_\_\_

## **Current Nurse Practitioner Program**

\_\_\_\_\_  
University/College                      Address

Specialty: \_\_\_\_\_ Current GPA: \_\_\_\_\_ Academic Honors: \_\_\_\_\_

Date Began Program: \_\_\_\_\_ Anticipated Completion Date: \_\_\_\_\_

## **Professional Status**

License, Type and # \_\_\_\_\_ Exp Date: \_\_\_\_\_

Certification \_\_\_\_\_ Date: \_\_\_\_\_

## **Professional Memberships**

CANP     Other \_\_\_\_\_

## **Professional Goals Form**

**The following questions must be answered and submitted with the application for your application to be processed. We expect well thought-out answers. (1-2 pages)**

1. What is your history of professional involvement (Employment history, Professional organizations, Volunteerism, Leadership activities)
2. What are your educational goals?
3. What are your professional goals?
4. Briefly relate a pivotal moment or episode that helped shape your decision to become a Nurse Practitioner.
5. Why do you deserve this scholarship?