



## Iowa Nurses Foundation Scholarship Mike Anderson Memorial Fund Application & Criteria

### Purpose Statement:

The Mike Anderson Memorial Fund Scholarships together with the Iowa Nurses Foundation promote professional nursing in Iowa by supporting the education of future nurses. The late Mr. Anderson and his family, desire to support deserving young people in the State of Iowa in obtaining a nursing school education. Scholarships shall only be awarded to students who themselves or their parents are unable to pay for their education.

Applicants need to be full or part-time students currently enrolled at DMACC, Grandview or University of Iowa, College of Nursing with the intent of earning an ADN or BSN degree. **This is important to note that students at these institutions are the ONLY persons that can apply for this scholarship.**

### Awards:

#### Iowa Nurses Foundation – Mike Anderson Memorial Fund

Pre-licensure ADN and BSN programs

- **Currently enrolled at DMACC, Grandview, or U of IA College of Nursing**
- **Residents of the state of Iowa at the time the scholarship application is submitted**

### Application Process:

Complete the following check list to assure all components of the application are received in the Iowa Nurses Foundation office by **April 27**. Each document submitted must clearly identify the following information:

- Applicant name and address.
- Scholarship level applicant is seeking (ADN/BSN)

All materials must be mailed directly to the:

Iowa Nurses Foundation  
2400 86<sup>th</sup> Street, #32  
Urbandale, IA 50322

- Applicant** to submit a Professional Promise Essay and resume or vitae attachment and current academic transcript(s) directly to the Iowa Nurses Foundation, 2400 86<sup>th</sup> Street, #32 Urbandale, IA 50322. See details next page.
- When considering a scholarship that considers your financial status as one of the evaluative criteria, a FAFSA (Free Application for Federal Student Aid) form or Need for Assistance Statement must be submitted with the application.
  - Please use the remainder of this page to share (type please) any extenuating circumstances and/or events that affect your financial situation. Please limit your typed response to the front of this page only. Examples of extenuating circumstances would be parent/spouse loss of job, another child in college, etc.
- Academic transcripts from all institutions where nursing coursework was completed.
- Required letters of reference must be sent directly to the Iowa Nurses Foundation at the above address. See reference form, page three.



**Iowa Nurses Foundation Scholarship  
Mike Anderson Memorial Fund**

**Applicant Cover Page**

**Return this cover page with completed  
Professional Promise Essay and  
Resume or vitae attachment**

Applicant Name \_\_\_\_\_

Applicant Address \_\_\_\_\_

Applicant Phone Numbers \_\_\_\_\_

Scholarship(s) applicant is seeking: (Applicants may apply for more than one scholarship source if eligible.) Only applications from students enrolled in the ADN or BSN programs at DMACC, Grandview or the University of Iowa, College of Nursing are eligible to apply. The students at the time they apply for the scholarship are to be residents of the state of Iowa.

**Iowa Nurses Foundation – Mike Anderson Memorial Fund**

Pre-licensure ADN or BSN

Academic transcripts have been requested from the following institutions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Required letters of reference requested to be sent directly to the Iowa Nurses Foundation.

When considering a scholarship that considers your financial status as one of the evaluative criteria, a FAFSA (Free Application for Federal Student Aid) form must be submitted with the application or statement of Need for Assistance.

Please use the remainder of this page to share (type please) any extenuating circumstances and/or events that affect your financial situation. Please limit your typed response to the front of this page only. Examples of extenuating circumstances would be parent/spouse loss of job, another child in college, etc.

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Urbandale, IA 50322

**All material must be submitted by April 27.**

## Application content/information

- 1) Professional Promise Essay (Form and style will be evaluated for punctuation, grammar and spelling)
  - A. For Pre-licensure students:
    - What are your career goals?
    - Describe the area(s) of nursing practice where you believe you have something special to offer. Discuss your interest in that area and how your interest and goals will enhance the delivery of quality health care in Iowa.
    - Provide a statement of how this financial assistance would impact your ability to meet your educational goals. Award recipients will be expected to provide progress reports on actual use of the funds and educational progress.
    - Provide **two** professional letters of reference supporting your desire and ability to meet your goals.
  
- 2) Attach a resume or vitae including the following information items.
  - Service activities in nursing, including involvement in any state or national nursing organizations that demonstrate leadership or professional development.
  - Service activities in non-nursing areas that demonstrate leadership or community service.
  - Academic standing. Transcripts will be required.
  - When considering a scholarship that considers your financial status as one of the evaluative criteria, a FAFSA (Free Application for Federal Student Aid) form must be submitted with the application.
  - Please use the remainder of this page to share (type please) any extenuating circumstances and/or events that affect your financial situation. Please limit your typed response to the front of this page only. Examples of extenuating circumstances would be parent/spouse loss of job, another child in college, etc.



## Iowa Nurses Foundation Scholarship Mike Anderson Memorial Fund

### Reference Request

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- **Residents of the state of Iowa at the time the scholarship application is submitted**

#### Application Process:

As part of the applicant process, you have been asked to write a reference for the following individual:

Applicant Name \_\_\_\_\_

Scholarship applicant is seeking: \_\_\_\_\_  
(ADN/BSN)

All materials must be mailed directly to the:  
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2400 86<sup>th</sup> Street, #32  
Urbandale, IA 50322

**All material must be submitted by April 27.**