

**WASHBURN UNIVERSITY  
SCHOOL OF NURSING**

Date Rec'd: \_\_\_\_\_

**APPLICATION FOR NURSING ENDOWED SCHOLARSHIPS**

**Application Deadlines:** Academic Year: January 1 – February 15  
Spring (only) Semester: September 1 – October 15

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ SS#: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date admitted to Washburn: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ Total Hours Completed: \_\_\_\_\_

Full-time student: \_\_\_\_\_ Part-time student: \_\_\_\_\_

Employed by: \_\_\_\_\_

List current enrollment, including course numbers and credit hours:

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

List enrollment for next semester, including course numbers and credit hours:

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

I have filed the Washburn University Financial Aid Application with the Financial Aid Office:  
(This is required to qualify for any Nursing Scholarships.) \_\_\_\_\_ Yes \_\_\_\_\_ No

Name of High School graduated from: \_\_\_\_\_

County of permanent residence: \_\_\_\_\_

I am currently receiving the following sources and amounts of financial aid:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ General University Academic Scholarship  
University Scholarships (Valedictorian, Garvey, Shaw, Presidential, Wiseman,  
Finnup, Hindman, ROTC, Leadership, Athletic, or Washburn Recognition)  
Nursing Scholarship  
Other Scholarships – list names:

(over)

Please describe your nursing goals following graduation. Please Provide specific career interests:

Please return to the School of Nursing by the deadline dates listed on the front page of this form.  
If you have any questions, please contact Dean Scheibmeir at 785-670-1525.