

Deadline: May 1, 2009

JO-ANN MEISTER NURSING SCHOLARSHIP APPLICATION

2008 - 2009

Given by the Sandy Creek Central School Alumni Association

Name: _____
LAST NAME FIRST NAME MIDDLE

Address: _____
NUMBER AND STREET

CITY STATE ZIP

Home Phone: () _____ Cell Phone: () _____

Date of Birth: _____
MONTH DAY YEAR

Parents / Guardians: _____

HAVE YOU ATTENDED THE NEW VISIONS PROGRAM? _____

HAVE YOU ATTENDED A NURSING ASSISTANT BOCES PROGRAM? _____

COLLEGE OR VOCATIONAL

College or vocational school you plan to attend.

(Please list in order of preference the schools to which you have applied.)

_____ City _____ State _____

_____ City _____ State _____

Have you received an acceptance letter? YES _____ NO _____

EMPLOYMENT: List all work experience, both full and part-time.

Begin with your most recent employment.

From	To	Employer	City & State	Position

VOLUNTEER EXPERIENCE: List all volunteer experience both full and part-time.

Begin with your most recent experience.

From	To	Organization	City & State	Position

GOALS AND ASPIRATIONS

Make a brief statement of your plans as they relate to your educational and career objectives and long term goals. (e.g. - where you are now, where you want to eventually end up, and how you plan to arrive at your destination.)

LIFE CHALLENGES

If you dealt with any challenging circumstances or situations that have had a major impact on your education, or your life in general, that you would like to have considered when we evaluate your application.

(e.g. - financial, health, learning challenges, etc.)
