The Georgia Nurses Foundation announces a call for applications for the annual Georgia Nurses Foundation and Georgia Nurses Association Nursing scholarship awards. These programs include: the Katherine Pope Scholarship awarded by the Georgia Nurses Foundation; the Annie Lou Overton Scholarship for the Georgia Nurses Association.

These programs provide financial assistance to qualified applicants studying nursing in an accredited school, college or university. Applicants may be enrolled full or part-time in a graduate or undergraduate nursing program. Interested students must have a GPA of at least a 2.5 on a 4.0 scale in prior academic work and be able to verify financial need.

Scholarship funds are obtained through the tax-deductible contributions of nurses and supporters of nursing. The scholarships are awarded in minimum amounts of $500, in odd years only.

Applications are attached and may be duplicated for additional submissions. Thank you for your assistance in promoting these awards to interested nursing students.
KATHERINE POPE SCHOLARSHIP

With a nursing career spanning 45 years, Katherine Pope, RN, dedicated her life to the profession of nursing. She has been described as "the ideal nurse: a selfless, genuine caregiver who puts the needs of others ahead of herself".

Ms. Pope believed that nursing enabled her to best serve her country, her fellow human beings and the community. The Katherine Pope Scholarship demonstrates the impact nursing can make to health care and to the community and extends Ms. Pope's commitment to the career advancement of nurses.

A nursing leader, beloved friend and respected colleague, Katherine Pope has always encouraged others to be their best. This scholarship in her name acknowledges future nursing leaders who are committed to excellence in their field and to the care of those in need.

ANNIE LOU OVERTON SCHOLARSHIP

Annie Lou Overton served as Executive Director of the Georgia Nurses Association for a number of years. For her time, she was very liberal and determined to build a strong Georgia Nurses Association.

Today, Annie Lou Overton's convictions remain alive through the students honored with a scholarship in her name. Funding for this scholarship was willed to the Georgia Nurses Association by Annie Lou Overton to ensure nursing students have every opportunity to realize their potential. And, through their education and professional growth, impact the nursing profession and the world in which we live.

These scholarships are an important way of continuing the commitment to nursing made by these outstanding leaders.
Georgia Nurses Association and Georgia Nurses Foundation
Scholarship Application

Including:  
- Katherine Pope Scholarship awarded by the Georgia Nurses Foundation
- Annie Lou Overton Scholarship awarded by the Georgia Nurses Association

The Georgia Nurses Foundation and Georgia Nurses Association Scholarship Programs provide financial assistance to qualified applicants studying nursing in an accredited school, college or university. The scholarships are available to full- and part-time students, including students enrolled in Associate Degree, Baccalaureate, Master’s and Doctoral programs in nursing.

All applicants must meet the following eligibility requirements:

- Currently enrolled in an accredited program in nursing
- Resident of Georgia
- Verifiable financial need
- GPA of at least 2.5 on 4.0 scale in prior educational work
- All non-RN applicants must have completed one year of study
- Provide two letters of reference which indicate leadership, scholarship and potential for success in the practice of nursing

Priority will be given to applicants who meet the following criteria:

- Enrolled in a Georgia school, college or university
- Plans to practice professional nursing in Georgia following graduation
- Member of respective professional organization (i.e., Georgia Association of Nursing Students, Georgia Nurses Association, Georgia Association for Nursing Education, etc.)
- RN to BSN completion for Annie Lou Overton Scholarship

Application deadline:

Application and supporting documents must be postmarked no later than June 15th, in odd years only.

Selection process:

Selection will be based upon compliance with basic eligibility requirements set forth by the Georgia Nurses Foundation and Georgia Nurses Association. Applicants selected by the Scholarship Committee will be confirmed by the Board of Trustees of the Georgia Nurses Foundation and the Executive Boards of the Georgia Nurses Association. Award recipients will be honored at the Georgia Nurses Association Biennial Convention.

Fund distribution:

Upon verification of selection by the Georgia Nurses Foundation Board of Trustees and Georgia Nurses Association, recipients will be notified by letter, and a check for the scholarship amount will be issued to the recipient. Recipients will be awarded a minimum amount of $500.
GENERAL SCHOLARSHIP PROGRAMS APPLICATION

PART I - To be completed by applicant. (PLEASE PRINT CLEARLY)

☐ Katherine Pope Scholarship    ☐ Annie Lou Overton Scholarship

Name: ___________________________ Social Security #: ________________.

Street Address: ____________________________.

__________________________________________________________________
(City)     (State)   (ZIP)

Telephone: ________________ How long have you lived in Georgia: ________.

Permanent address (if different from current): ____________________________

__________________________________________________________________
(City)     (State)   (ZIP)

Name and address of college or university in which you will be enrolled and the year for which
you are seeking scholarship:

Name of school: ____________________________

Address: ____________________________

Placement Year: ________ Type of Program (circle one): BSN  ADN  Master's  Doctoral

Expected date of completion: __________ Full-time: ________ Part-time: __________

Where do you plan to practice professional nursing? ____________.

Procedure for Application Process:

1. Attach the following documents to your completed application:
   • Official transcripts of previous academic work and standing
   • Verification of enrollment in an accredited nursing program
   • Validation of Georgia residency (photocopy of Georgia Driver's License)
   • Verification of professional organization membership

2. Have two references send letters of recommendation directly to the Georgia Nurses
   Foundation at the address below by June 15, of odd years.

3. Mail Completed Application with attachments by June 15 (odd years only) to:

   Georgia Nurses Foundation, Inc.
   Attn: Scholarship Committee
   3032 Briarcliff Road, NE
   Atlanta, Georgia 30329-2655
1. Provide a statement of your professional goals. (Master's and Doctoral applicants should include goals for the nursing profession, such as community involvement and leadership in nursing).

2. List your contributions to the nursing profession and/or community-related activities, including memberships in professional organizations and/or community-related activities.

3. State your beliefs about the role of nursing in the delivery of health care.
Sources of income for the academic year in which you seek scholarship funds:

<table>
<thead>
<tr>
<th>APPLICANT INCOME</th>
<th>AMOUNT PER YEAR</th>
<th>SPECIFIC SOURCES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholarships</td>
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<tr>
<td>Loans</td>
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<td>Military Aid</td>
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<td>Salary</td>
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<td>Dividends/Investment</td>
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<td>Spouse Income</td>
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<tr>
<td>Parent Support</td>
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</tbody>
</table>

Total annual income: $  Number of persons dependent on income: _____

Anticipated expenses for the year in which you seek scholarship funds:

<table>
<thead>
<tr>
<th>EXPENSE</th>
<th>AMOUNT</th>
<th>CLARIFICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
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<td>Books/supplies</td>
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<td>Room/board</td>
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<td>Transportation</td>
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<td>Child care</td>
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<tr>
<td>Other</td>
<td></td>
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</tr>
</tbody>
</table>

In making this application for scholarship, I understand the scholarships will be awarded for one year on the basis of need and without regard to race, color, national origin, religion, sex, age, handicap or veteran status. Further, I understand qualifications for receiving a scholarship include that I be a student in good standing in an accredited college or university. If I wish to be reconsidered for a scholarship in subsequent years, I must reapply.

(Signature of applicant)  (Date)
STATEMENT OF FINANCIAL NEED

PART II - To be completed by Director of Financial Aid, Director of Admissions or equivalent.

(PLEASE, PRINT CLEARLY)

Student’s Name: ________________________________________________________________.

Student’s Address: __________________________________________________________________.

____________________________________________________________ (City)     (State)   (ZIP)

Will applicant be enrolled in your school's graduate, baccalaureate or associate program leading to a degree in nursing? Yes ___ No ___.

If student is currently enrolled, is he/she making satisfactory progress in the program? Yes ___ No ___.

Is student enrolled in the program full time? Yes ___ No ___.

As the awarding of these scholarships is based on need, please indicate whether you believe this applicant needs financial assistance as documented by a need assessment:

Needs financial assistance _______ Does not need financial assistance _______.

If financial assistance is indicated, please give information that could help the committee award the scholarship to the applicant based on need. (Use separate sheet or the back of this page)

____________________________________________________________ (Signature)      (Title)   (Date)

Please return this form by JUNE 15 (odd years only) to:

Georgia Nurses Foundation, Inc.
Attn: Scholarship Committee
3032 Briarcliff Road, NE
Atlanta, Georgia 30329-2655

Thank you very much for your assistance in helping the Georgia Nurses Foundation and Georgia Nurses Association in our endeavor to facilitate the education of nurses to meet future health care needs.