

# BLACK NURSES ASSOCIATION OF INDIANAPOLIS, INC. SCHOLARSHIP APPLICATION

This scholarship is open to an undergraduate, minority nursing, student who has completed at least two semesters of clinical experience. The applicant should be an Indiana resident with a minimum GPA of 2.7 and involved in a community service activity.

**Two letters of recommendation and a copy of your current official transcript must accompany this application. One letter should be a current nursing instructor.**

**PLEASE TYPE OR PRINT CLERALLY!**

Name: \_\_\_\_\_ GPA \_\_\_\_\_

ADDRESS: \_\_\_\_\_ SCHOOL \_\_\_\_\_  
FULL \_\_\_ PART TIME \_\_\_

PHONE #: \_\_\_\_\_ E-MAIL \_\_\_\_\_ GRADUATE DATE \_\_\_\_\_

**LIST COMMUNITY SERVICES:**

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**Indicate why you believe you should be considered for this scholarship. (attach sheet for additional space.)**

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**Write essay on how you would improve the health and social conditions of racial/ethnic minorities. Limit your paper to a maximum of three typed, double spaced pages.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed application with transcript, two references, and an essay to the Black Nurses Association of Indianapolis, Inc., PO Box 804, Indianapolis, IN 46206**

**Deadline March 31, 2007**