

Return to application to :

Summit & Portage District, Ohio Nurses Association
2020 Front Street
Suite 309
Cuyahoga Falls OH 44221

Earl W II & John D Blackstone Nursing Scholarship Award Deadline: August 1

Scholarship Application – Return this application along with a “letter of good standing” verifying senior status in the program and GPA.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

GPA: _____ Age: _____

Are you married? YES NO If yes, do you have children.? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

Why you deserve a \$1,000 award for the fall/spring semester. 50 words or less.

Future plans for your nursing career. 50 words or less.