

LeRoy Larsen Nursing Scholarship

Eligibility:

- Burt or Washington County High School graduate (past or current)
- Employee of a Burt or Washington County medical facility
- Attending, or will be attending, a nursing program in an accredited school/college

Selection Criteria:

Academic performance and financial need are the foremost considerations

Value:

To be determined: minimum of \$1,000

Application requirements:

- Completed application form
- Two letters of recommendation from non-family members
- Official high school transcript
- Activities resume

Mail to:

Washington County Community Foundation Scholarship Committee
c/o Lizz Abrahams
1615 Washington Street
Blair, NE 68008
Due April 1st, 2024



LeRoy Larsen Nursing Scholarship Application

Name:				
Last	First	Middle	Date of Birth	
Address:				
City:		State/Zip (Code:	
Primary Phone:				
Parents and/or Legal Guardia				
Relationship to student:				
Others in home:		tionship:	Age:	
High School:				
College attending/applying to:				
Accepted?	If already at	ttending, how long?		
GPA/class rank (high school c	or college):			
Employer:		Occupation:	_	

Please attach resume of extracurricular activities, leadership positions, hobbies, volunteer and job experiences.
Please answer the following questions:
1) Why did you choose this field?
2) Describe any skills, strengths, or involvement that would prepare you for a career in nursing.
3) What are your career goals?
4) Why are you applying for this scholarship?
5) Are you currently enrolled or accepted into a higher education nursing program?
Requirements for completed application: Official school transcript, activities resume and two letters of recommendation from non-family members. Completed applications must be postmarked no later than April 1st 2024

Please mail to:

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Questions? Please contact scholarships@washcocommfoundation.org