

## **Northwest IASN Conference Attendance Scholarship**

The former Northwest IASN Division is offering grants for school nurses in northwestern Illinois to attend the IASN Annual conference. Up to twelve \$150 grants will be awarded annually. Grants will continue to be awarded until all the money is used up.

### **Applicants must:**

- Reside in Boone, Winnebago, Ogle, Stephenson, or JoDavies counties.
- Be a current member of IASN
- Agree to share information learned at the conference with other nurses in their school district after the conference and before the end of that school year.

The scholarship will be paid to the individual on the last day of the conference. Must be present to receive the scholarship.

### **To Apply:**

- Complete the application form (attached)
- Write an explanation of how you will share information learned at the conference with other school nurses
- E-mail the application form as an attachment and written pages explaining the project to: [IASNFoundation.contact@gmail.com](mailto:IASNFoundation.contact@gmail.com)

**DEADLINE: Midnight September 1**

**Northwest IASN Conference Attendance Scholarship Application Form**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Credentials: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_  
Personal E-mail: \_\_\_\_\_  
IASN/NASN Membership #: \_\_\_\_\_ Years as an IASN Member: \_\_\_\_\_

Current Employer: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Current Job Position: \_\_\_\_\_

Explain any large financial obligations (college tuition, medical bills, child support, etc):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain what you hope to learn/gain by attending the IASN Annual conference:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you plan to share the information you learn at the conference with the other nurses in your district? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_