The goal of the Cleveland Clinic Akron General Service League Nursing Scholarship is to provide financial assistance for students regardless of race, religion, sex, age, disability or national origin who are accepted by an accredited college of nursing. The Cleveland Clinic Akron General Development Foundation through endowments funded by the Cleveland Clinic Akron General Service League and other benefactors will provide scholarships. The scholarships are awarded based on candidate’s scholarship and financial need.
ELIGIBILITY

- Candidates must be accepted by an accredited Graduate Nursing Program.
- Candidates must maintain a grade point average of 3.0 or more as submitted by university.
- Applications will be available in January of each year. Candidates may pick them up in the Volunteer Services department, print off the intranet, or have one mailed to them.
- The deadline for the scholarship is March 1st.
- Scholarships are awarded in April of each year and finalists must interview in person. Recipients are invited to attend the May Service League Luncheon meeting.

For further information, please contact the Volunteer department at (330) 344-6541.
CLEVELAND CLINIC AKRON GENERAL
SERVICE LEAGUE APPLICATION FOR
GRADUATE EDUCATION IN NURSING SCHOLARSHIP

Name _________________________________________________   Date__________________
Address __________________________________________________ City_________________
Zip ________ Telephone ____________________ Social Security ______________________
U.S. Citizen _______________________________   or     Permanent Resident ______________

Are there other family member’s currently attending college?  Yes_______  No_______
If yes, how many? ______________________
Are you receiving any other scholarship or financial support? ____________________________
If yes, please indicate the type and amount:
_______________________________________________________  $_____________________
_______________________________________________________  $_____________________

Have you been accepted or are you currently enrolled in an accredited Graduate Nursing
Program in Ohio?  Yes _______ No ________

School you are currently attending or plan to attend: ____________________________________

Letters of reference (Reference must be specific to scholarship, i.e. employer/faculty, and not a
relative of applicant)

1. Name _______________________________ Occupation _______________________
   Address ____________________________ Telephone __________________________

2. Name _______________________________ Occupation _______________________
   Address ____________________________ Telephone __________________________

3. Name _______________________________ Occupation _______________________
   Address ____________________________ Telephone __________________________
List Educational Experiences to Date:

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<tr>
<th>High School/College</th>
<th>Dates Attended</th>
<th>Graduation Date</th>
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List Professional Activities (use separate sheet if necessary):

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Please submit the following items to: Volunteer Service Department
Service League Nursing Scholarship Committee
Cleveland Clinic Akron General
1 Akron General Avenue
Akron, Ohio 44307

☐ Scholarship Application
☐ One paragraph written by applicant explaining why you are interested in this field
☐ Three letters of reference
☐ Certified Transcript or letter from university stating grade point average
☐ Final candidates will be required to personally interview on designated date

DEADLINE FOR APPLICATIONS IS MARCH 1st
APPLICATIONS RECEIVED AFTER MARCH 1st WILL NOT BE CONSIDERED