

# Weston T. Letter Memorial Nursing Scholarship

## Scholarship Application Fall 2009

10 - \$550 scholarship awards  
Application Deadline: **November 6, 2009**

**Selection Criteria:**  
Block IV nursing student at MCC

Name: \_\_\_\_\_  
Last First Middle

Maricopa Student ID: \_\_\_\_\_

Address: \_\_\_\_\_  
Street No. City State Zip

Telephone Number (home & cell): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Are you single parent?  Yes  No

Are you married with recent life change?  Yes  No

(Examples of life changes: loss of job, illness, recent divorce, etc.)

Number of children: \_\_\_\_\_ Ages of children: \_\_\_\_\_

Have you applied for financial aid?  Yes  No

**For consideration of this scholarship, please attach a one page essay addressing....**

- How the scholarship to cover your NCLEX-RN application fee will benefit you and achievement of your educational goal.

**Any incomplete or unreadable applications will not be considered.**

**Application Deadline – Friday, November 6, 2009**

**(Return application to the Development/Scholarship office)**

**Top level of the Kirk Student Center (clock tower building in the center of  
Dobson/Southern campus)**

For initial scholarship consideration, your application is based on the date received and does not constitute a guarantee of award. Check with your institution for scholarship deadlines and/or other information from the college web-site. I certify that the information provided is accurate and correct to the best of my knowledge. I authorize the Maricopa Community Colleges to release academic, financial, and/or any other necessary information to the donor and/or the Maricopa Community Colleges Foundation, as such entity may require.

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

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

