



WIN \$1,000 FOR YOUR EDUCATION

The Margaret Mary & Peter Kennedy Nursing Scholarship

Awarded to any employee enrolled in an Associate or Bachelor's Degree in Nursing or for Registered Nurses enrolled in a Master's Degree in a nursing, healthcare or business program.

APPLICANT REQUIREMENTS:

- Be employed at Montefiore Nyack Hospital and have completed one year of service and meet all performance standards.
- Have completed a minimum of six credits toward their degree with a 2.5 GPA or above.
- Submit a completed application, including recommendations.
- Remain employed at Montefiore Nyack Hospital for at least one year and remain continuously enrolled in the educational program.

Applications can be obtained through our **secured employee section of our website montefiorenyack.org** and are also available in the Human Resources Department (Ext. 2155) or the Nursing Office (Ext. 2680).

**RETURN COMPLETED APPLICATIONS TO HUMAN RESOURCES
NO LATER THAN MAY 10, 2024.**



Margaret Mary & Peter Kennedy Nursing Scholarship Application

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Margaret Mary & Peter Kennedy Nursing Scholarship Application

Name of Candidate: _____

Cell Phone: _____ Work Phone: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Department/Unit: _____

Job Title: _____

*Applicant's name should appear **only on this page**. Do not place applicant's name anywhere else on application to ensure objectivity on the part of the judges. The judges will rate the applicant on the attached criteria. Please print or type all responses.

Please complete the attached **questions** and provide two (2) letters of recommendation: One letter from a **manager** and one letter from a **co-worker**.

Applications must be postmarked or hand delivered to Human Resources, no later than **Friday, May 10, 2024**.

APPLICANT # _____

Margaret Mary & Peter Kennedy Nursing Scholarship Application

Date of Hire: _____ Job Title: _____

Name of College/University: _____

Degree: _____

Number of Credits Completed: _____ Anticipated Date of Graduation: _____

PERFORMANCE APPRAISAL (MOST RECENT)

To be completed by Human Resources: (Date) _____ (Score) _____

1. What qualities do I possess that would be valuable as a registered nurse?

2. In your present role, how do you contribute to quality patient care?

APPLICANT # _____

Margaret Mary & Peter Kennedy Nursing Scholarship Application

3. What are your career goals?

4. What advice would you have to improve the role of nursing at Montefiore Nyack Hospital?

5. Why do you want to be a nurse? If already a nurse, why are you going to school?

NAME: _____ APPLICANT # _____

Margaret Mary & Peter Kennedy Nursing Scholarship Application

LETTER OF RECOMMENDATION FROM A MANAGER

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Signature: _____

Title: _____

NAME: _____ APPLICANT # _____

Margaret Mary & Peter Kennedy Nursing Scholarship Application

LETTER OF RECOMMENDATION FROM A CO-WORKER

[illegible]

Signature: _____

Title: _____