ERVIN L. STEELE
Nursing Scholarship 2022—2023 Official Entry Form
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NAME:_____
(Last) (First) (Middle)
Address:_____

High School:_____

Email address:_____

Date of Graduation:_____ School Phone #:_____

Grade Point Average through Mid—Senior Year:_____

Verified by:_____Title:_____

COPY OF SCHOOL TRANSCRIPT MUST ACCOMPANY APPLICATION:

School / College of Nursing to which you were accepted.

Name:_____

Mailing Address:_____

_____

Phone Number:_____

Signature:_____Date:_____

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Applicant's Name:_____

Deadline for submission to Guidance Counselor **April 10, 2023**

Please submit any information, (i.e. part time work, volunteer work) you have performed which is pertinent to the Nursing field. Your reason for selecting Nursing as a career, and your reason for applying for this scholarship.

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