

HACKENSACK MERIDIAN *HEALTH*
Ocean University Medical Center
Marlene (Sue) Wynkoop, RN, Memorial Scholarship
2026 APPLICATION

INSTRUCTIONS: To honor the memory of Marlene Sue Wynkoop, RN, the family has established a nursing scholarship in her name. Sue, being a nurse herself, was always grateful for the wonderful care she received at Ocean University Medical Center. Marlene (Sue) Wynkoop Scholarships are available for Hackensack Meridian *Health* nursing students who are enrolled in pre-licensure nursing programs preferably the BSN leading to RN licensure. Applicants must provide documentation that they have attained good academic standing. This scholarship is to be used to supplement tuition, fees, lab costs, books, or educational supply expenses.

Deadline for Submission: March 19, 2026

Scholarships will be awarded during Nurses Week 2026

Please complete entire application and return with documentation

Preferred Option: Scan completed application and supporting paperwork as one document (not as a link or shortcut) then email to AnnMayCenter@HMHN.ORG

=====

Name _____ Peoplesoft ID # _____

Address _____

City _____ State _____ Zip Code _____

Telephone: Home _____ Work _____ Cell _____

Email _____ Position _____

Date of Birth _____ Marital Status _____ No. of Dependents _____

Campus _____ Unit _____ Nurse Manager _____

Years of Service at Hackensack Meridian *Health* _____

___ Full Time ___ Part Time ___ Per Diem (Amount of days per month at HMH ___)

Name of School: _____

Current Program of Study: _____

GPA for prior semester based on 4.0: _____

Date of Entry _____ Expected Date of Graduation _____

Number of credits this semester _____ Total credit earned to date: _____

Courses this Semester _____

Eligible for Tuition Reimbursement: _____ Full _____ Partial _____ Not eligible

Clinical Advancement Status _____

National Certifications _____

Total Cost of Program: _____ Fees _____ Per Credit _____ Books Current

Scholarships/Financial Aid _____

Awards or Recognition _____

II. Additional Documentation Required:

- A. Manager Letter of Support, signed and dated**
- B. Peer Letter of support, signed and dated**
- C. Resume**
- D. Transcript and/or proof of registration in an academic program**

III. Personal Statement: Please explain why you merit consideration for this scholarship. Limit your response to no more than two pages. Include any additional, personal, financial or academic points that you would like considered. Include documentation on how you have contributed to an environment of excellence at Hackensack Meridian Health. Please sign and date your statement.

Place a check next to the enclosed documents:

____ Support Letters ____ Resume or CV ____ Transcript ____ Personal Statement

All of the information contained in this application is correct. I agree to accept all decisions for scholarships made by the Selection Committee.

Signature of Applicant

Date

All information provided in this application will be kept confidential. Please make sure that the application is complete and includes all additional documentation required as well as your personal statement.

For more information Email AnnMayCenter@HMHN.org

PLEASE KEEP A COPY OF YOUR APPLICATION FOR YOUR RECORD