The Kenneth G. and Millicent C. Brown Memorial Nursing Scholarship

The Kenneth G. and Millicent C. Brown Memorial Nursing Scholarship was established in 2010 to honor the memory of Kenneth and Millicent Brown, a long time physician in obstetrics at Jersey Shore University Medical Center and his loving wife.

This award will be presented annually to a Jersey Shore University Medical Center Nursing Students who works in the *maternity or neonatal* departments at the hospital.

The award may be used to:

- Further the nurse’s education in an academic setting
- Attend a national/international conference

Award Criteria:

1. The nurse nominee must have made a significant contribution to nursing or nursing scholarship

2. The applicant must currently be employed by Jersey Shore University Medical Center

3. The applicant must demonstrate commitment to quality of care within the maternity/neonatal practice arena.

4. If the Award will be used to further a nurse’s education, enrollment in a nursing program must be documented.

**DEADLINE: JULY 24, 2020**
Kenneth G. and Millicent C. Brown Memorial Nursing Scholarship

INSTRUCTIONS: Kenneth G. and Millicent C. Brown Memorial Nursing Scholarship are available for Jersey Shore University Medical Center employees who work in the maternity or neonatal departments and who are enrolled in generic nursing programs (RN), upper division nursing programs (RN to BSN), or advanced degree programs including graduate, certificate, and/or doctorate program in nursing or related areas or who would like to attend a conference to further their education. Please complete entire application and return to Ann May Center for Nursing by July 24, 2020.

Name _______________________________________ Peoplesoft ID #_____________

Home Address_________________________________________________________

City_________________________ State_________________ Zip____________

Telephone: Home ______________ Work ______________ Cell_________________

Email Address_______________________________ Position_____________________

Campus_________ Unit___________________ Nurse Manager___________________

Years of Service at Hackensack Meridian Health __________

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

CARE Level Achieved ___________________________________________________________________

The Award will be used to(check one):

_____Further the nurse’s education

_____Attend a national/international conference

Please write a brief description of the intended use or the Award____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Membership in Professional Associations/Offices Held

_____________________________________________________________
Membership in Hospital Committees

Awards

Publications/Presentation

Documentation that must be included: Application will not be considered without all of the following:

1. Signed, dated, completed application
2. Signed, dated Personal statement
3. Manager and Peer support letters*
4. Completed W9
5. Program cost documentation

*Previous letters from Nurse Managers and peers can be used for up to ONE calendar year if a copy of the original letter is re-signed and re-dated for current scholarship cycle.

Personal Statement (attach to application): Please explain why you merit this scholarship. Limit your response to no more than two pages. Document how you have made significant contribution to nursing and/or how you have demonstrated leadership and commitment to quality care.

I attest that all of the information contained in this application is correct. I agree to accept all decisions for scholarships made by the Selection Committee. If I receive and accept a scholarship, I agree to work for MH for at least one year.

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.

Send to:
Ann May Center for Nursing and Allied Health
1350 Campus Parkway, Suite 101
Neptune, NJ  07753

For more information, call the Ann May Center for Nursing: 732-481-8570 or 732-481-8578
Email AnnMayCenter@HackensackMeridian.org  Fax 732-481-8597

PLEASE DO NO USE STAPLES
REMEMBER TO KEEP A COPY OF YOUR APPLICATION FOR YOUR RECORDS
PLEASE COMPLETE AND ATTACH THE W9 PROVIDED