



## DEAN'S EXCELLENCE IN NURSING LEADERSHIP GRADUATE SCHOLARSHIPS

Master of Science in Nursing: Care and Outcomes Manager

### Background

Nurses play a key role in ensuring the continued quality of patient care and evidence-based outcomes in our nation's health care system. The need for strong, effective nursing leadership and nursing faculty in health care has never been more critical. In response, Pacific Lutheran University's School of Nursing offers its Master of Science in Nursing (MSN) to prepare registered nurses to become administrators, leaders and educators.

Each year, PLU awards scholarships ranging from \$4,000 to \$20,000 to new students in the BSN to MSN Care and Outcomes Management (MSN-COM) program or the Entry-Level MSN (ELMSN) program. The number of scholarships awarded and amount will vary, depending on the qualifications of the candidates. These graduate scholarships are for students pursuing advanced preparation for positions in supervision, administration, teaching or as an advanced generalist. The scholarship is designed to support graduate nursing students committed to improving health care outcomes, as well as improving their leadership and management skills through the pursuit of the MSN Care and Outcomes Manager degree.

The scholarships are awarded for one year, and renewed for a second year by a) maintaining full-time student status during the summer, fall and spring terms, b) maintaining good standing in the program including a 3.0 or better in all courses, and a cumulative GPA of 3.0 or better, and c) for RNs and second-year ELMSNs maintaining an unencumbered active registered nurse license and the ability to practice without restriction in the State of Washington.

### Eligibility

All graduate program applicants seeking the MSN Care & Outcomes Management focus area either as BSN to MSN or Entry-Level MSN may apply for these scholarships.

### Application Procedure

To apply for the Dean's Excellence in Nursing Leadership Graduate Scholarships, please:

1. Submit the Dean's Excellence in Nursing Leadership Graduate Scholarship application form no later than the priority deadline dates.
2. Complete the FAFSA (Free Application for Federal Student Aid) at [www.fafsa.ed.gov](http://www.fafsa.ed.gov) no later than recommended dates.

Scholarship applications will only be considered for those who have submitted a complete application for the MSN program. If you have not been notified that all your application materials have been received, please contact the Office of Admission, Graduate Programs.

### Send Application Materials to:

Office of Admission—Graduate Programs  
Pacific Lutheran University  
12180 Park Avenue South  
Tacoma, WA 98447

Phone: 253-535-7151  
Fax: 253-536-5136  
Email: [gradadmission@plu.edu](mailto:gradadmission@plu.edu)

### Scholarship Application Priority Deadline Dates:

Priority Deadline #1: November 15<sup>th</sup> (Submit FAFSA no later than January 15<sup>th</sup>)

Priority Deadline #2: April 15<sup>th</sup> (Submit FAFSA no later March 15<sup>th</sup>)

When completing the FAFSA be sure to indicate that you want the results of your analysis sent to PLU (use code 003785). Be sure to print your confirmation page and include your email address so the FAFSA generated Student Aid Report can be emailed to you. The FAFSA is available each year after January 1<sup>st</sup> for the subsequent summer, fall and spring terms.

Scholarship materials may be postmarked by the due date, or received by email or fax no later than 11:59pm on priority deadline dates.



APPLICATION FORM

DEAN'S EXCELLENCE IN NURSING LEADERSHIP GRADUATE SCHOLARSHIPS

Master of Science in Nursing: Care and Outcomes Manager

Name: \_\_\_\_\_

Term beginning program: \_\_\_\_\_

Employer: \_\_\_\_\_

Do you have tuition assistance through your employer? Y N

If so, what percent or amount? \_\_\_\_\_

Other financial assistance I am receiving in order to attend PLU (include information about loans and other aid from all sources): \_\_\_\_\_

Signature of Understanding

The information on this form is accurate. Also by signing this form, I authorize PLU to verify the above information. If at any time, the information on this form is deemed falsified by the School of Nursing and/or PLU, I understand that my financial assistance from PLU may be revoked and I may be dismissed from the program.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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