MASTER OF SCIENCE IN NURSING

Graduate Fellowship Application



The graduate fellowship program offers graduate students an opportunity to participate in academic and administrative activities that will enhance their graduate education experience, as well as provide financial assistance. Information in the applicant's admission file may be assessed. To be eligible for a graduate fellowship, an applicant must be: (a) admitted to the PLU graduate program, (b) maintain a minimum cumulative 3.0 graduate grade point average, and (c) be enrolled during the semester/term of the fellowship.

A limited number of fellowships are available during academic year. We do not offer full tuition awards. You will receive a small stipend in exchange for the assistance you provide the faculty or administrative member. In general, fellowship awards are for interactions and opportunities involving time commitments between 5 and 10 hours per week. Criteria for awarding fellowships may include any combination of the following: (a) skills and abilities, (b) academic merit, (c) potential for success, and (d) contribution to the mission of the graduate program and university. Fellowships may be considered taxable income.

HOW TO APPLY: Submit this form along with a current resume to the address listed at the bottom of the page by the May 1st deadline.

<u>May 1</u> is the priority application date for fellowship consideration for the Fall and Spring. Applications received after the priority date will be reviewed as funds are available.

Total amount of fellowship and scholarship financial aid <u>may not exceed</u> a student's total tuition cost for the period awarded.

| Personal Information | | | |
|--|---------|---------------|----------|
| Date | | PLU ID or SSN | |
| Name | | Home Phone | |
| Address | City | Work Phone | |
| State | Zip | Email | |
| Additional Information | | | |
| How many semester hours in the next academic year are you planning to enroll? | | | |
| Summer | Fall | J-term | Spring |
| Are you receiving other forms of financial aid? Yes \square No \square If yes, please note all sources: | | | |
| If you plan on continued employment while enrolled in the graduate program, please indicate your place of employment and the nature of commitment (hours per week and responsibilities). | | | |
| Do you receive tuition assistance from your employer or other source? Yes \square No \square If yes, how much? | | | |
| Indicate your preferable graduate fellowship duty: Research □ Administrative/Programmatic □ | | | |
| Identify any other unique skills and abilities you possess which should be considered: | | | |
| Please indicate your availability (business hours are between 8am - 8pm): | | | |
| I acknowledge with my signature below that to the best of my knowledge all statements I have made in this application are complete and true. I give my permission to Graduate Programs and Continuing Education and individual graduate programs to use this application form and any or all materials from my graduate application file for the purpose of reviewing my credentials for a graduate fellowship or scholarship. | | | |
| Student Name (print) | Student | t Signature | Date |