

Jean Ann Walker Royston Nursing Scholarship APPLICATION FORM

**2021-
2022**



You must either type or print all your answers neatly in ink. Application response may be sent via email to stupidscienceinc@gmail.com. **Scholarship application, unofficial transcripts, and letters of recommendation must be received no later than 5/15/2021 to the above email.**

Commented [KR1]: Hey, please add logo to the header next to mine. Please review requirements and make additions as needed.

1. Name _____, _____ M.I.
Last First

Permanent mailing address

_____ Number and street
 _____ City _____ State _____ Zip _____ E-mail

Phone _____ Birth date _____
Area Code Telephone Number Month Day Year

2. What year did/will you receive a high school diploma or GED?..... _____

_____ High School Name or GED County _____ City _____ State

3. High school students only

_____ High School GPA

4. College GPA through January 2020: Undergraduate GPA: _____

_____ Name of Community College or University _____ Dates Attended _____ Degree In Progress _____ Transcript Sent

Major Field of Study _____

Expected college graduation date after 9/1/22 _____
Year Month

5. Are you currently working 20 hours or more per week? Yes/No [Y/N]..... _____

Do you plan on working 20 hours or more per week during the 2021-2022 school year? Yes/No [Y/N] _____

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6. Please provide a brief essay (500- word min; 1200 max) essay describing your STEM career aspirations. Describe how this scholarship will aide you in achieving your goals.

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7. Letters of Recommendation: Please provide one letter from any school official or senior peer and one letter from a professor in your major courses.

CERTIFICATION. ALL APPLICANTS: I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form, my transcripts, and any additional supporting documentation submitted as part of this application. I give permission for selection committees to contact high school and/or college officials for additional academic information. **If chosen for scholarship award, I agree to provide proof of GPA to the committee at each semester/quarter break in order for the committee to determine future eligibility.** I further agree if chosen to submit a written paragraph to be published on the Stupid Scientist's website and social media pages on the value of this scholarship award in my academic pursuits.

Signature _____

Date _____

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Letter of Recommendation

**2020-
2021**



Applicant's Name _____

Recommender's Name and Contact Information _____

Applicant's Name _____

Recommender's Name and Contact Information _____

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Letter of Recommendation

**2020-
2021**

