

2017 Louisiana Long Term Care Foundation Nursing Scholarship

"Make more than a living. Make a difference."

Dear Applicant:

Thank you for your interest in the Louisiana Long Term Care Foundation (LLTCF) Nursing Scholarship. Our committee will award scholarships for a minimum of \$500 to registered nursing students who meet the qualifications set forth by the LLTCF. Our program is made possible by fundraisers and generous donations from LNHA members and supporters.

As you know, the nurse shortage is a serious issue throughout all health care fields and is especially severe in the nursing home profession. We hope this scholarship opportunity encourages you to continue your career in long term care nursing. You already know the rewards of providing continuous care to residents, of being a key decision maker in the care giving process, and of working in the growing, vital field of geriatrics. Become part of the solution. Allow us to help you advance your long term care career today. Make more than a living. Make a difference.

The following criteria must be met to qualify for a scholarship:

1. An electronic or scanned copy of your letter of acceptance from an accredited LPN, RN, BSN or MSN program.
2. Two completed scholarship recommendation forms. At least one form should be completed from someone representing your nursing facility (administrator or DON). Click [here](#) to download the recommendation form.
3. A completed LLTCF nurse scholarship application. (See page 2.)
4. A personal essay describing your future plans and interest in long term care nursing. (See page 2.)

Application forms along with supporting documentation should be completed and submitted **electronically in one email** to Karen Miller, LLTCF Foundation Director, at kmiller@lnha.org with the subject line of "2017 LLTCF Scholarship Application" by **Sunday, November 12, 2017**. Your application will be automatically denied if you fail to follow these instructions or meet the criteria listed. Scholarship recipients will be announced in January 2018. If you have any questions, contact [Karen Miller](#).

Sincerely,



Karen Miller
Louisiana Long Term Care Foundation Director

Application Form

Name of Applicant

Permanent Address

Phone

Email Address

What is the name of the facility where are you currently employed?

Facility Address

Years of employment at facility

How many total years of experience do you have in long term care?

Name of educational institution to which you have been accepted

Start Date

I have completed **all** of the prerequisite classes.
(Initial if true)

School Address

What special training do you have in related fields?

Describe your future professional plans.

Personal Essay

In the space below, provide a brief essay including the following information:

- Any professional experiences you have in long term care.
- Your interest in long term care nursing as a profession.
- Any unique challenges you believe the long term care nursing profession holds.

Signature

Date