



California State University
SAN MARCOS
SCHOOL OF NURSING

Application Deadline: Submit with Program application

IMPORTANT: **Download** this document first and **Save** on your computer.

After completing the form **re-save** the completed document to your computer and submit it with your program application under the "Documents" tab. If you have already submitted your program application, email as attachment to: el@csusm.edu

*Indicates required fields.

Applicant's Contact Information

*First Name

*Last Name

*Address

*City

*State

*ZIP Code

*Email

*Phone (enter only numbers)

Eligibility Requirements – Confirm the following criteria to qualify for the Academic Scholarship.

*Are you a Registered Nurse, currently employed by Southern California County Hospital as listed within the application? (Click on the dropdown arrow to answer.)

*Please specify your Southern California County Hospital work location:

*What is your cumulative GPA? (e.g. 3.00 or 3.73)

Please list professional nursing organizations you are a member of and describe your participation:

Essay

*In 300 – 500 words, discuss the following three topics: Career and Personal Goals, Health Care related Community Service/Involvement, and Financial Need (3,000 character maximum). **Please note:** Be sure you have **downloaded** and **saved** this document **prior** to completing the essay portion of this application.

Statements of Acknowledgement

* I understand that to maintain eligibility for this scholarship, I must maintain a minimum cumulative GPA of 3.00 (on a 4.00 scale) for the courses taken in the RN-BSN program.

I agree

* I understand to be considered for this program I must maintain continuous enrollment.

I agree

* And, I understand to be considered for this program I agree to work for the above listed Southern California County Hospital for 2 years AFTER completion of this degree program.

I agree