

**\$1000 Dr. Marcia Rachel Excellence in Leadership Award**  
Student Information Form

Name \_\_\_\_\_  
Please Print

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Email \_\_\_\_\_

**School of Nursing** in which student is enrolled \_\_\_\_\_

**Classification** in nursing program \_\_\_\_\_

**Activities:** (membership, committees, offices, special projects, etc.)  
*attach additional pages as needed*

**Memberships**

\_\_\_\_\_  
\_\_\_\_\_

**School of Nursing activities**

\_\_\_\_\_  
\_\_\_\_\_

**Community activities**

\_\_\_\_\_  
\_\_\_\_\_

**Awards & Honors**

\_\_\_\_\_  
\_\_\_\_\_

**GPA** \_\_\_\_\_ **Mississippi Nursing License number** \_\_\_\_\_

**Please submit to:**

Mississippi Nurses Foundation:  
Lane Ware Graduate Mental Health  
Nursing Scholarship

31 Woodgreen Place  
Madison, MS 39110

Phone: 601.898.0850

Email us: [foundation@msnurses.org](mailto:foundation@msnurses.org)

**DEADLINE for submission: July 9, 2021**

**Complete Application Must Include:**

- Student information form;
- Essay;
- Official transcript showing GPA of 3.0 or higher
- 2 Letters of Reference
- Letter from school verifying the student is enrolled and in good academic standing.