

**\$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

**DEADLINE for submission: July 8, 2022**

**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.