

MARY WALLAN NURSING SCHOLARSHIP 2024

-	awarded to a current or enrolled	s a nurse in our community for many years. This \$1000 I student of an ADN or BSN nursing program whose Jmatilla or Morrow Counties.
Name:		
City, State, & Zip:		
Phone #:	Date of Birth:	Email
	Jmatilla/Morrow County: license, school ID, utility bills, et	_ (minimum 1 year required) please attach proof of c.)
transcripts for any o	classes taken in the last 4 years a	ase attach a copy of your unofficial academic and contact information for the school. ad?
(Please attach a copy	of the acceptance letter) Antici	pated Graduation Date:
		<u></u>
1) What led you to	choose a career in nursing? 2) when you were able to help sor	s) answering the following questions: How do you plan to serve your community as a nurse? neone, and how you feel that experience will benefit
Applicant's Signature_		Date
If submit	Submit ap Emily Smith, St. Antho 2801 St. Anthony Way Or submit SAHScholarships@ ing via email, all pages/docume	an May 5, 2024. Postmark does not count. plication to: ony Hospital Foundation y, Pendleton, OR 97801 via email to: @commonspirit.org ents MUST be in a single PDF file (merged)
(Points Will	-	e submitted. Files can be merged for free at robat/online/merge-pdf.html)

Questions? Call 541-278-2627