

**SCHOOL OF NURSING AWARDS APPLICATION**

**COMMENCEMENTAND HONORS COMMITTEE**

**FALL 2016**

**BSN AND MSN GRADUATES DEADLINE**

**DATE: FRIDAY, OCTOBER 28, 2016**

Download this document to your desktop. You will be able to insert the requested information by typing directly onto this form on your desktop. Carefully read the selection criteria for each of the awards listed below. If you wish to be considered for more than one award, please submit a separate application for each award. Please attach your one page statement explaining how you qualify for the award.

When you have completed this form, return it as an e-mail attachment to the School of Nursing at the following e-mail address: donnelly@oakland.edu. If you have any questions, please contact your School of Nursing Academic Adviser.

**[ ]  BOARD OF VISITORS EXCELLENCE IN NURSING AWARD**: One award is available for Fall 2016 graduating students in each of the following three categories: BSN (Basic and Accelerated Second Degree), RN-BSN Degree Completion Sequence and MSN. Applicants must demonstrate a strong academic and clinical performance. In particular, applicants must demonstrate that they have provided an outstanding level of professional quality patient care.

**[ ]  ELSEVIER HEALTH SCIENCES BOOK AWARD:** One award is available to a BSN (Basic and Accelerated Second Degree) or RN-BSN Degree Completion Sequence Fall 2016 graduating student who demonstrates sensitivity to human needs, compassionate behavior, support to other classmates, and a humanistic set of values.

**[ ]  EXCEPTIONAL ACHIEVEMENT AWARD:** One award is available to a BSN (Basic and Accelerated Second Degree) or RN-BSN Degree Completion Sequence Fall 2016 graduating student who demonstrates outstanding academic and professional performance.

**[ ]  LEADERSHIP AWARD:** One award is available for a BSN (Basic and Accelerated Second Degree) or RN-BSN Degree Completion Sequence Fall 2016 graduating student who demonstrates the ability to organize and implement group projects related to the health needs of the local community, demonstrates interest in professional growth (including membership in a nursing organization), and/or supports the School of Nursing through committee involvement or class projects outside of lecture and clinical.

# Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ G#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OU e-mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (C/H) #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: (Street) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(City, State, Zip Code) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Page 2**

**Current Class Standing (Check one box below):**

# [ ]  Basic BSN

 [ ]  Accelerated Second Degree BSN

[ ]  RN-BSN or RN-MSN Degree Completion Sequence

[ ]  MSN

#### LEADERSHIP ACTIVITIES, PROJECTS, AWARDS AND HONORS: *List relevant university and community activities in which you have participated without pay during your BSN or MSN academic program.*

|  |  |  |
| --- | --- | --- |
| **Activities**  | **Awards** | **Honors** |
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Please check all boxes below:

[ ]  I certify that all the information set forth in this application and supplementary materials are complete and accurate.

## [ ]  I authorize the release of the information provided and my related academic history as listed on my Oakland University transcript to official parties for award consideration.

[ ]  I understand that award applicants must be in good academic standing and good disciplinary standing at OU and in the School of Nursing. I authorize that my student conduct record be reviewed as part of the selection process.

[ ]  I have attached a Personal Statement of Qualifications for this award.

# Applicant’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ G#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***\*RETURN COMPLETED APPLICATION TO:***

***School of Nursing at: donnelly@oakland.edu***

###  Deadline date is Friday, October 28, 2016 for award consideration.

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