



New Brunswick  
Nurses Union

Syndicat des  
infirmières et infirmiers  
du Nouveau-Brunswick

## **NBNU Nursing Scholarships (2<sup>nd</sup> Year Students)**

### **Terms of Reference**

NBNU is committed to supporting students enrolled in the baccalaureate of nursing and practical nursing programs. To this end, it is offering, on a provincial basis, one (1) \$1,000 scholarship to a full-time second year student studying in the baccalaureate in nursing program (BScN) and one (1) \$1,000 scholarship to a full-time second year student studying in the practical nurse program (LPN program) enrolled in either a Francophone or Anglophone college or university program.

### **Who is eligible?**

- Students enrolled in the second year of the baccalaureate in nursing program (BScN) or practical nurse program (LPN Program).
- The student must be a relative of a past or present NBNU member.
- The applicant must have maintained a good academic standing.

### **How to apply**

- Complete the application form (below)
- Submit a 250-word essay on “The Importance of Unionism in the Work Life of Nurses.”
- Attach a certification of academic achievement (transcript of 1<sup>st</sup> year and second year mid-term marks) or letter of reference from professor(s).

The completed application form required documents must be mailed by September 30 of each year to:

NBNU Nursing Scholarships  
(2<sup>nd</sup> Year Students)  
New Brunswick Nurses Union  
103 Woodside Lane  
Fredericton, NB E3C 0C5



## APPLICATION FORM NBNU NURSING SCHOLARSHIPS (2<sup>ND</sup> YEAR STUDENTS)

**MAIL TO:** NBNU Nursing Scholarships  
 (2<sup>nd</sup> Year Students)  
 New Brunswick Nurses Union  
 103 Woodside Lane  
 Fredericton, NB E3C 0C5

### INFORMATION PERTAINING TO APPLICANT

**Name of Applicant:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**E-mail** \_\_\_\_\_

**Currently attending :  
 (institution)** \_\_\_\_\_

**Date :** \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

### INFORMATION PERTAINING TO RELATED NBNU MEMBER

**Name:** \_\_\_\_\_

**Relationship to Applicant** \_\_\_\_\_

**Address** \_\_\_\_\_  
 \_\_\_\_\_

**Place of Employment** \_\_\_\_\_

**Retired:**       Yes       No

**No applications will be considered after September 30th of each year.**