북텍사스 한인 간호사 협회
NORTH TEXAS KOREAN NURSES ASSOCIATION (NTKNA)
2026 SCHOLARSHIP APPLICATION

Academic Year: 2026-2027

Award Amount: $750, 4 persons

Application Deadline: September 12, 2026

Submission email: ntkna1968@gmail.com

Section 1: Eligibility Screening Checklist

Please answer the following screening questions to confirm your eligibility before filling out the rest of the application.

1. Are you currently enrolled in an accredited nursing program (ADN, BSN, MSN, DNP, or PhD) as a full-time student?

2. Do you hold and maintain cumulative GPA of 3.2 on a 4.0 scale?

3. Are you currently a member of the North Texas Korean Nurses Association, or would you be willing to become a member upon receiving this scholarship?

4. Are you a Korean (or Korean American)?

5. Are you currently living in North Texas (DFW area)?

6. Will you be available to attend and volunteer at the NTKNA Health Fair on October 10th, 2026. Scholarship recipients will be honored during the Health Fair's opening ceremony at 9:00 AM at New Song Church. The Health Fair will run from the conclusion of the ceremony through 3:00 PM.

***Note**: if you answered "No" to any of the screening questions above, you do not meet the minimum eligibility criteria for this scholarship cycle.*

Section 2: Applicant Information

Personal Details

Full legal Name: _____

NTKNA membership: [ ] Yes [ ] NO [ ] Willing to join the NTKNA

Mailing Address: _____ City/State/Zip: _____

Phone Number: _____

Email Address: _____

Academic Status

Current Nursing Institution: _____

Degree/Program Track:

[ ] ADN [ ] BSN/RN-to-BSN [ ] MSN [ ] DNP [ ] PhD

Enrollment Status: [ ] Full-Time [ ] Part-Time

Current Cumulative GPA: _____(Scale: 4.0)

Anticipated Graduation Date (MM/DD/YYYY): ____/____/_____

Section 3: Personal Statement and Essays

Please attach your written responses (a minimum of 100 words – 200 words maximum per question) on separate sheets.

1. Essay 1: Professional Vision

   Describe your clinical or academic goals in nursing. How will completing your current degree program impact patient outcomes and the future of healthcare delivery in the community you will serve?

2. Essay 2: Community Service

   Describe a community service involvement in which you made or will make a positive contribution to health equity or nursing practice.

Section 4: Required Supporting Documents Checklist

All supporting documentation must be submitted in a single pdf packet attached to your application email.

1. Completed & Signed Application Form
2. Official Academic Transcripts (from your current nursing program and most recent previous institution)
3. Proof of Active Enrollment Letter on official institutional letterhead
4. Proof of active NTKNA membership (if applicable)
5. Professional Resume or Curriculum Vitae
6. Two (2) Letters of Recommendation:
   a. Academic: From a current nursing faculty member or instructor
   b. Professional/Community: From a clinical supervisor, healthcare manager, or community organization leader (excluding NTKNA)

Section 5: Applicant Attestation & Signature
I hereby certify that all statements made in this application and all attached supporting documents are true, complete, and accurate to the best of my knowledge. I understand that providing false or misleading information will result in immediate disqualification or forfeiture of any scholarship award granted.

Applicant Printed Name: _____

Applicant Signature: _____

Date: _____