

Nursing Scholarship Program

Guidelines

The following scholarships will be awarded to nursing students with outstanding academic performance:

**The Jennie Cramer Memorial Scholarship
The Robert A. Gordon Memorial Scholarship
The R. Dale Hughes Scholarship**

Requirements

All applicants must be:

- Enrolled in the last two years of an accredited nursing program;
- Ranked in the upper 20th percentile of their classes with a grade point average of 3.2 or above (on a 4.0 scale);
- Reside within LVH-Pocono service area of Monroe, Pike, northern Northampton or northwest Warren Counties (Hughes scholarship is ONLY Monroe County residents)
- Currently work, or express an interest in working for LVH-Pocono as a nurse upon graduation; and
- Submit evidence of current academic standing with the application.

Selection Process

- Applications must be received by March 15, 2024.
- The LVHN-Pocono Foundation Scholarship Committee will announce the winner by May 3rd.
- The selected students will receive their award check by mail.
- Scholarship recipients are asked to submit a letter of appreciation to the scholarship sponsors and are required to attend the Annual Grant & Scholarship Award Ceremony at LVH-Pocono on May 16, 2024.

To Apply

Interested students complete enclosed application and send to:

LVHN – Pocono Foundation
206 East Brown Street
East Stroudsburg, PA 18301

Or email: denise.dubois@lvhn.org

Please call (570) 476-3531 with any questions.

Jennie Cramer, Robert A. Gordon, R. Dale Hughes

NURSING SCHOLARSHIP PROGRAM

Application

Name: _____

Address: _____

City/State/Zip Code: _____

Phone: (____) _____ Email address: _____

School Name: _____

Address: _____

City/State/Zip Code: _____

School Phone: (____) _____ Email: _____

Name of Nursing Program/School: _____

Degree to be awarded upon completion: _____

Anticipated program completion date: _____

*Current Academic Standing:

Class Ranking _____ and/or GPA _____

Current Employment Status:

Employer: _____

Title: _____

_____ Full time _____ Part time

Prior Employment/Experience in Healthcare (*please list*):

Special Clinical Interest(s):

Awards/Recognitions (*list year and organization*):

Community Service:

**Please attach a copy of school records validating the information supplied on the application.
(RNs or LPNs pursuing another level of education may provide RN/LPN class rankings.)*

**Please enclose two letters of recommendation.*

**Please include a one-page essay describing what motivated you to pursue a career in Nursing*

**Applications must be received by March 15, 2024.*

****Send completed application and supporting materials to:***

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