

January 24, 2022

ATTN: School Guidance Counselor
RE: Sertoma Nursing Scholarship

The Sertoma Club of Omaha is offering one \$1200.00 Nursing Scholarship to a graduating senior from an Omaha area high school. An application form is enclosed, copies of which must be submitted by each applicant.

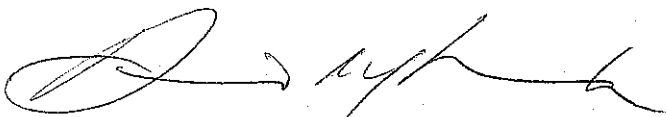
ELIGIBILITY REQUIREMENTS:

- Available to any **2022** graduating senior regardless of race, sex, religion or school affiliation.
- Must have maintained the equivalent of a "3" average throughout high school.
- Must submit an essay of 500 words or less on the subject of "What Nursing Means to Me." (Please note: the essay must avoid any identification of the applicant or the school attended, to allow for impartial judging of the essay.)
- Must submit a list of volunteer or service organizations in which the applicant is or has been active, along with any positions held in the organization(s) and an estimate of the amount of time donated to the organization(s).
- The scholarship will be awarded to the applicant whose essay is judged to be the best and whose volunteerism is judged to be significant.
- The winning applicant must be accepted by and meet the admission requirements of an accredited college or university.

SUBMISSION:

Applications accompanied by essays must be submitted to the Sertoma Club of Omaha, signed by a school official and mailed no later than **April 1, 2022** to David A. Stranglen, 2112 Savannah Drive, Papillion, NE 68133. The Sertoma Club of Omaha will judge the essays and select the winning entry. The winner will be notified and the scholarship presented at the Sertoma Club of Omaha's annual Service to Mankind Banquet.

If you have any questions about the requirements or submissions procedures, please call me at 402 - 291 - 5000 during regular business hours.



David A. Stranglen, Chairman
Nursing Scholarship Program

**APPLICATION FOR
NURSING SCHOLARSHIP AWARDS PROGRAM**

STUDENT'S NAME: _____

ADDRESS: _____

PHONE #: _____

HIGH SCHOOL ATTENDED: _____

ANTICIPATED DATE OF GRADUATION: _____

NURSING COLLEGE YOU
PLAN TO ATTEND: _____

Note: This application must be approved and signed by your school principal or counselor.

Approved this _____ day of _____, 2021

School Official: _____

Title: _____