

Massachusetts Organization of Nurse Executives
Nurse in Washington Intern (NIWI) Scholarship
Application Package

Massachusetts Organization of Nurse Executives Nurse In Washington Intern (NIWI) Scholarship General Instructions

Application:

- 1) Complete and sign the application. Applicant must submit four (4) copies (the original and 3 copies of the application and required supporting documentation).
- 2) All submissions must be in printed format (word-processed or typewritten) and all items completed and signed where indicated. All required supporting documents must accompany the application. Please do not submit double-sided copies.
- 3) Narrative statements are heavily weighed in the selection process. Consider your statements carefully. Narratives are rated based on content, clarity and relationship to MONE's Mission, Vision and Core Values.
- 4) Incomplete applications, late applications and those responses that either fail to meet or exceed the requirements will be returned without review.
- 5) Deadline for receipt at MONE address listed below: **November 15, 2007.**
Successful Candidate to be notified: **December 15, 2007.**
The NIWI Program will take place: **March 2008.**
- 6) Mail four (4) copies (the original and 3 copies) of the application and required supporting documentation, collated as 4 complete packets, to:

MONE
Government Affairs Committee
101 Cambridge Street, #220
Burlington, MA 01803

Travel Expense Reimbursement Procedure/Guidelines:

All reservations are the responsibility of the scholarship recipient. The recipient will be reimbursed upon submission to the MONE office of a reimbursement request for expenses in any of the following categories: air fare, train fare, or mileage (48.5 per mile or current IRS mileage rate), ground transportation to and from airport and hotel, hotel room charges, and meals. **Reimbursement for this scholarship will not exceed a total of \$2,000. Reimbursement requests must be submitted within 21 days of completion of the program and be accompanied by receipts.** Expenses in excess of \$2,000 are the responsibility of the recipient.

**Massachusetts Organization of Nurse Executives
Nurse In Washington Intern Scholarship Criteria – Application Process**

Selection

- The NIWI Scholarship Panel, comprised of representatives from MONE's Government Affairs Committee, will review all scholarship applications. The MONE Board of Directors will select the scholarship recipient from the finalist pool submitted by this panel.
- Scholarship recipients will be notified by mail by **December 15, 2007**.
- One scholarship will be awarded.
- Scholarships are to be applied to the next NIWI program following the award announcement.
- The name and likeness of the recipient may be used by MONE for inclusion in pertinent announcements or articles.
- Scholarships will be awarded with the understanding that the same fees are not covered by any other source (i.e., the employer, other organizations or scholarships).
- The decision of the MONE Board of Directors will be final.

Application Process

The following materials must be submitted:

- 1) Completed and signed application. Applicant must submit four (4) copies (the original and 3 copies of the application and required supporting documentation).
- 2) Brief CV – no more than 3 pages – outlining professional background, continuing education participation, professional publications or presentations, honors or awards.
- 3) Two letters of reference from professional colleagues knowledgeable about your governmental affairs activities and goals.
- 4) A narrative statement describing your local or national political involvement that demonstrates an interest in governmental affairs and the political advancement of nursing programs or community projects. State your accomplishments, e.g., service on a local political board (school, community, state); representing nursing in the state legislature, etc. Describe how you see MONE benefiting as a result of your attending NIWI and how receiving this scholarship will help you obtain your professional goals and contribute to the nursing community (maximum 1 page, typed).
- 5) On a separate page, explain how you expect to take the knowledge gained from NIWI and apply it to your specialty, your specialty organization, and any other areas. Describe how you plan to disseminate this knowledge to members of MONE and to your nursing organization(s) (maximum 1 page, typed).

Massachusetts Organization of Nurse Executives
Nurse In Washington Intern (NIWI) Scholarship Application Form
Must be postmarked on or before **November 15, 2007**

APPLICATION MUST BE TYPEWRITTEN, WORD PROCESSED OR COMPUTER GENERATED IN THE EXACT FORMAT BELOW
ELIGIBILITY: THE APPLICANT MUST BE A CURRENT MONE MEMBER.

Name (and credentials) _____ M F

Address _____

City _____ State _____ Zip _____

Telephone: H (_____) _____ W (_____) _____ Fax (_____) _____

E-mail _____

Have you previously attended NIWI? Yes No

Nursing Experience

Current Employer _____

Address _____

City _____ State _____ Zip _____

Position _____ Dates of Employment _____

Please list the year you became a MONE member _____

MONE Committee Participation: _____

Community Activities _____

Basic Nursing Education

School _____

Address _____

City _____ State _____ Zip _____

Highest level of education obtained _____

I confirm that I meet the eligibility criteria, and that the information on this application and any documentation submitted within is correct to the best of my knowledge. Falsification or failure to follow all instructions will disqualify my application. I hereby give permission for MONE to use and duplicate submitted materials for the purposes of review, conference proceedings, association publications, promotion, and placement in MONE files. If awarded funds by MONE, I agree to have a copy of my transcript, certification results, or contact hours received from National Conference or NIWI sent to MONE upon request.

Signature _____ Date _____