



Norma Underwood Scholarship

The Alabama Baptist Nursing Fellowship leadership team reviews applications and awards the Norma Underwood Scholarship on the bases of criteria listed below.

- Up to \$500 annually may be awarded to a student nurse for her participation in a ministry project or missions trip.
- Up to \$500 annually may be awarded for assistance with books or tuition.

Applicant Criteria:

1. The applicant must be a student nurse who is actively involved as an Alabama BNF member for a minimum of six months prior to application.
2. The student nurse should give a description of BNF involvement.
3. The student should give pertinent information including major accomplishments, awards, community and or church service. Please write this in paragraph form on the back of the application.
4. The student nurse should include information regarding the name and address, along with a contact phone number, for the school of nursing department.
5. The student nurse should include two letters of recommendation from either a nursing faculty member from their school of nursing or Campus ministry leader, Pastor, or BNF Student Organization Leader.
6. The student nurse should send their personal testimony along with the reason why they chose the nursing profession.
7. The student nurse agrees to submit a written report of the mission trip or ministry project to Alabama BNF for inclusion in the Alabama BNF Newsletter.



Norma Underwood Scholarship Application

Submit application to: Alabama WMU, Baptist Nursing Fellowship, P.O. Box 11870, Montgomery AL 36111-0870

Date: _____

Name: _____
(Last) (First) (Middle)

Address: _____
(City) (State) (Zip)

Home Phone#: _____ Cell Phone#: _____

E-Mail: _____

Nursing Program Entered: _____ Current GPA _____

BNF Involvement: _____

Give the name, address, and phone number for a contact person in your school of nursing _____

If you are applying for a ministry project/mission trip scholarship, write a brief description, including the sponsor, of the mission trip or ministry project below. Also provide a contact number for the sponsor.

_____ Total Trip/Ministry Amount: _____

(This section for administrative use only) One copy to Alabama BNF Team Leader: One copy to Alabama WMU Representative

1. _____ Date of applicants BNF membership
2. _____ Description of BNF involvement received
3. _____ Copy of GPA received
4. _____ Contact information for school of nursing department received
5. _____ Letters of recommendation received
6. _____ Personal testimony received

Application reviewed by: _____

Application granted for \$ _____ If application is not granted please give a brief explanation below: