

Now taking applications for the

Dr. Joseph Zaydon Scholarships

- This Scholarship Fund will be used for scholarships awarded to qualifying students who are enrolled as full time students at Western Kentucky University.

- This award will be given to students who are entering into their Senior year at WKU studying [Nursing \(BSN\)](#)

- The main consideration for recipients of this scholarship is financial need and outstanding academic performance.

- Applicants will need to complete a WKU TOPDollar Scholarship application. Please visit: <http://www.wku.edu/topdollar>

- Applicants must also fill out a scholarship application and submit a short statement (two pages or less) that discusses your interest in nursing and your future career plans to serve your community.

- Applications are available online. Please visit: http://www.wku.edu/chhs/current_students_info.php

- Submit application & statement via email to: chhs@wku.edu

For more information on this scholarship,
please contact: chhs@wku.edu

**All applications for this scholarship must be
received by April 15, 2022**





Dr. Joe Zaydon BSN Scholarship Application

Instructions: Please complete the application, save, email to chhs@wku.edu, and attach supporting application materials.

APPLICANT INFORMATION

Name:

WKU ID Number:

Local address:

Mailing address: (if different than above)

City:

State:

ZIP Code:

Local Phone:

E-Mail Address:

WKU INFORMATION

Major:

Minor:

Overall GPA:

_____(minimum 3.5)

Earned Credit Hours:

_____(minimum 70)

SUPPORTING APPLICATION MATERIALS

Please attach a short statement (two pages or less) that discusses your interest in Nursing and future career plans to serve your community. Be sure to include the following in your essay:

1. Describe your career goals.
2. Describe any clinical experiences in nursing.
3. Describe your aspirations to serve your community with your degree.

FOR MORE INFORMATION ON THIS SCHOLARSHIP, PLEASE CONTACT:

chhs@wku.edu

SIGNATURE

By checking the box below, I grant approval to authorize the verification of the information provided on this form. I agree that typing my name in the signature box shall serve as my signature.

Signature of applicant:

Date:

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RECEIVED BY April 15, 2022.**