THE PATRICIA BOTTINO SCHOLARSHIP
FOR NURSING STUDENTS

APPLICATION PACKET
DEADLINE FOR FALL 2014: July 25, 2014
THE PATRICIA BOTTINO SCHOLARSHIP

Scholarship Criteria

The Patricia Bottino Scholarship Fund was established to benefit students enrolled full-time in a two-year degree program in Nursing at any of the seven colleges in the Community College System of New Hampshire. At least one $900 scholarship will be awarded annually, based on available funds. Applicants should have financial need, as determined by the Financial Aid Office. Applicants must have at least a 3.0 Cumulative Grade Point Average, as evidenced by current transcript(s). Student must be working toward an Associate’s Degree in Nursing. Applicants may write and submit a cover letter, no longer than one page, as to why they feel they should receive the award.

Application Procedure

Applicants should include all of the following in one package:
☐ The Patricia Bottino Scholarship Application Form;
☐ Release Statements Form (at the bottom of this page);
☐ Transcript(s)- official or unofficial;
☐ (Optional) A cover letter, < one page as to why you feel they should receive the award;
☐ (Optional) Send a digital photograph (headshot) of yourself to: CCSNHFoundation@ccsnh.edu. Photo may be used for promotional purposes/ press release.

Release Statements Form

“I certify that the information on this form application is true and complete to the best of best of my knowledge. In addition, this release statement authorizes the Community Colleges of New Hampshire Foundation to obtain information regarding my admission package for the purpose of determining scholarship eligibility. This information may be shared with the scholarship committee, college personnel, in accordance with state and federal regulations and college policy.”

_________________________________
Applicant’s Signature                  Date

“You may use my photo for promotional and marketing purposes if I am awarded this scholarship.”

_________________________________
Applicant’s Signature                  Date
THE PATRICIA BOTTINO SCHOLARSHIP
APPLICATION FORM

REQUIRED INFORMATION

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Initial</th>
<th>Last Name</th>
<th>Date of Birth</th>
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Street                  City                  State                  Zip Code                  Non CCSNH E-Mail

Address of Residence (if different from above)                  Phone Number(s)

Last four digits Social Security number XXX-XX- ___ ___ ___

Gender □ M □ F

College you are attending: □ White Mts. □ River Valley □ NHTI, Concord □ Lakes Region □ Manchester C
□ Nashua □ Great Bay

Expected College Graduation Date ____________________

Are you attending full-time?

Intended career:

How many credits have you taken at the Community College?

Have you completed a FAFSA with the Financial Aid Office? When?

How did you hear about this scholarship? □ I received an e-mail □ The Financial Aid Office
□ The Foundation’s website □ Other: ________________________________

Student should return this application form and accompanying materials to:
Community Colleges of NH Foundation; 26 College Drive; Concord NH 03301 www.ccsnh.edu/foundation
Using a separate sheet of paper, please type a cover letter, no longer than one page (single-spaced) describing why you feel you should receive this scholarship award. You should use a separate sheet of paper.

Some suggestions:

1. Discuss your out of school activities and experiences that have led you to pursue a career in the field of Nursing.

2. Discuss any obstacle that you had to overcome or are currently dealing contending with in order to pursue your educational objectives.

3. Discuss your plans after you graduate from college. What are your career goals? How you will apply your degree?

4. Describe how you are currently financing your education. Have you applied for financial aid through the Financial Aid Office?