**Graduate Student Professional Conference**

# Scholarship Application

## OHSU School of Nursing graduate students are eligible to apply for conference funding through the Graduate Nursing Senate through the Office of Student Affairs & Diversity. Current students can be awarded up to $300\*Ϯ per academic yearπ on a first-come first-serve basis. Students requesting funds should submit the attached application in order to gain approval for reimbursement prior to attending the conference.

To receive the reimbursement, students must agree to attend a Graduate Nursing Senate meeting and provide a brief presentation about what they learned from attending the conference. Students must apply for funding and reimbursement during the term in which the conference occurs. Funding will be available beginning 09/23/2019.

Funding can be applied to conference registration, poster printing, travel and/or lodging. Awards are made by reimbursement *after* the student has attended the conference or interprofessional workshop and *after* the student has presented to the Graduate Nursing Senate.

**Applications** are reviewed by the Graduate Nursing Senate Treasurer within the School of Nursing’s Office of Student Affairs and Diversity and **should be submitted via email** to [ramirezt@ohsu.edu](mailto:ramirezt@ohsu.edu) and [fornero@ohsu.edu](mailto:fornero@ohsu.edu).

## \*Students attending the Western Institute of Nursing (WIN) conference are eligible to receive up to $150.

Ϯ Reimbursement paperwork must be filed during term in which the conference or workshop occurs and will not be paid beyond that term.

π Academic year begins in Fall and ends Summer

**Application Checklist**

* Submit scholarship application and essay responses via email to Trina Ramirez and Kiki Fornero prior to attending the conference
* Schedule date of presentation to Graduate Nursing Senate
* Request reimbursement form from Trina Ramirez
* Submit receipts for reimbursement to Trina Ramirez

**Graduate Student Professional Conference Reimbursement Scholarship Application**

Name:

Program:

Anticipated graduation date:

Reimbursement amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Conference / Workshop attending:

Dates of Conference / Workshop:

Location of Conference / Workshop:

Is the conference / Workshop:

Local Regional National International

Have you been approved for a podium presentation? Yes No

Have you been approved for a poster presentation? Yes No

Date of GNS meeting at which you plan to present following the conference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On a separate document, please write a response (no more than one page) to the following questions: *If you are selected as a recipient of this scholarship, what three goals do you have for attending the conference. What impact will receiving this award have on you as a student?*

If selected for a scholarship, you agree to the following:

* Submit appropriate documentation (receipts related to requested funds and reimbursement form) to the Graduate Nursing Senate during the same term in which you attended the conference.
* Prepare a brief presentation of your experience to students on the Portland campus. Your presentation must occur before reimbursement is processed, with the exception of those who can demonstrate financial hardship.

By signing, you agree to the scholarship terms listed above.

Name Date