New Hampshire Association of Nurse Anesthesiology

Student Scholarship Application

Due November 15 · Attach your essay and any required documentation

APPLICANT INFORMATION

Full name _____

Email _____ Phone _____

Program _____ Expected graduation _____

CONFERENCE REQUESTED

Check one.

☐ AANA Mid-Year Assembly ☐ AANA Annual Congress ☐ Maverick or other regional anesthesia course

Course name and dates _____

ELIGIBILITY

Check all that apply.

☐ I am a student member of the NHANA Board of Directors.

☐ I live or work in New Hampshire, or I am completing clinical rotations at a New Hampshire site.

☐ I have accepted a post-graduation job offer in New Hampshire (attach documentation of the offer).

STUDENT BOARD MEETING ATTENDANCE

Student board members only. List the date of each NHANA board meeting you attended in the 12 months before the deadline, or since joining the board if you have served for less than 12 months.

1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

7. _____ 8. _____ 9. _____ 10. _____ 11. _____

Other NHANA service in the past 12 months, such as committee or task force work (optional):

CERTIFICATION

I certify that the information in this application, including any board meeting dates listed above, is accurate and complete. I understand that inaccurate information may disqualify my application.

Applicant signature _____ Date _____

FOR NHANA USE ONLY

Date received _____ Application complete and eligible (yes / no) _____

Board meetings attended (confirmed) / meetings held _____ Confirmed by association manager (name and date) _____