

## TERRY NGIRMANG NURSING SCHOLARSHIP PCC-BASED SCHOLARSHIP

SE SENCIU

P. O. Box 9 Koror, Palau 96940 Tel. No. (680) 488-2470 ext. 253 Fax (680) 488-2447 Email: tellei@palau.edu

Mrs. Terry Ngirmang and her family are proud sponsors of the Nursing Scholarship in the amount of \$500 to one full-time second-year students currently enrolled at Palau Community College. This scholarship fund was initiated to help committed individuals in pursuit of nursing careers to meet the growing healthcare demand in Palau. The selected student receives the \$500 annual year/ \$250 per semester if he/she continues to meet the eligibility requirements.

#### COMPLETE ALL SECTIONS. PRINT CLEARLY IN BLACK INK OR TYPEWRITTEN

| Section A: Personal Information   |                                      |                    |      |
|---|--------------------------------------|--------------------|------|
| Applicant (Last, First, Middle)   | Gender                               |                    |      |
|   |                                      | female             | male |
|   | Citizenship                          | D 1                | 110  |
| Tel. No(s). Cell No.  |                                      | Palau              | US   |
| Email Address   | Social Security                      | no.                |      |
| Place of Residence (hamlet)   | - ani i                              |                    |      |
| Mailing Address   | — Date of Birth                      |                    |      |
|   | Place of Birth                       |                    |      |
|   |                                      |                    |      |
| Section B: Educational Information  |                                      |                    |      |
| Name & Address of <b>High School</b> Attended   | Date of Graduation                   |                    |      |
|   | Cumulative Grade Point Average (GPA) |                    |      |
|   |                                      |                    | -    |
|   |                                      |                    |      |
| Name & Address of <b>College/University</b> Admitted to or Currently Attending  | Expected Date of Graduation          |                    |      |
| Currently Attending   | Field of Study                       | Nursing            |      |
|   | •                                    |                    |      |
|   | Cumulative Grade P                   | Point Average (GPA | A)   |
| I hereby certify that all the information I have provided is true and accurate to the best of my knowledge. I further   |                                      |                    |      |
| understand that I may be liable to <u>reimburse a portion of or the entire amount of the scholarship money</u> if I knowingly provide false information or fail to maintain my eligibility during the duration of this scholarship. |                                      |                    |      |
| · · · · · · · · · · · · · · · · · · ·   |                                      |                    |      |
| Applicant's Signature   | Date                                 |                    | -    |
|   |                                      |                    |      |
| FOR THE REVIEW TEAM (DO NOT FILL)   |                                      |                    |      |
| ( ) Application Form ( ) Birth Certificate ( ) Passport/Certification of Citizenship  |                                      |                    |      |
| ( ) Recommendation ( ) Essay  |                                      |                    |      |

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### I. IMPORTANT INFORMATON

#### A. CRITERIA OF ELIGIBILITY

- a. Proof of citizenship
- b. Accepted and enrolled as a full-time student **majoring in NURSING** at Palau Community College for Fall Semester with a minimum of 12 credits; a minimum cumulative grade point average (GPA) of 3.0

The student must maintain a minimum Cumulative GPA of 3.0 and a full-time status as a Nursing major with at least 12 credit hours to remain eligible for the next semester, otherwise you may be liable to reimburse a portion or the entire amount of scholarship money.

# II. REQUIRED DOCUMENTS

## PCC Second Year Students/Transfer Students from other Postsecondary Institutions

- a. Application Form
- b. Copy of Birth Certificate or Passport or Certification of Citizenship --- Palauan ???
- c. Official PCC Transcript from Registrar's Office; (Transfer student: Official Transcript from last school attended)
- d. Official Class Schedule from Registrar's Office
- e. One Recommendation Letter from a PCC Instructor of Your Field of Study or an Instructor from last school attended
- f. **Essay, 300-500 words, Typewritten** "How will this scholarship meet my educational goals?" or essay detailing his/her leadership experience and how this will influence his/her work as a professional nurse. ???
- g. One picture, ID or passport size

**Note:** An applicant can apply for more than one scholarship but will be awarded only one scholarship. An applicant may complete the different scholarship application forms and submit **ONLY one set of required documents.** All documents must be submitted to the Development Office. Contact (680) 488-2470 ext. 253 for further information.