VALERIE E. YAHN SCHOLARSHIP 2026 Application

Please TYPE or PRINT your answers. If application is illegible it will be returned to you.									
1	First			Last					
1	Name:			Name:					
1	l	<u> </u>		1 1					
2	Street			City/State/Z	ip:				
	I			I	1				
3	Daytin	ne Phone No.		Email:					
	1								
4	Date o	Date of Birth: Month/Date/Year:							
	Due of Birdi. Mondif Dute/ 1 cui.								
5	Name & address of parent(s) or legal guardian(s): Use reverse if you need more space:								
	Name:								
	Street								
	City State/Zip:								
	Home phone for parent or legal guardian ()								
	Home	phone for parent of	icgai guaiula	<u> </u>					
6	Curron	t High School			No. years attended:				
O	Curren	it High School			No. years attended.				
	Marsa	0- aitry of atle on lai ala	1		No years attended.				
7		& city of other high			No. years attended:				
	school	(s) attended:			No. years attended:				
	C 1	D ' / A / (CDA	`	0 40 1					
8	Grade Point Average (GPA) On a 4.0 scale: Attach proof of GPA. Your most recent Official school transcript required								
	Attach	proof of GPA. You	most recent	Official school transcrip	t required				
	A COTE O			O GATEG					
9	ACT S		T 1	Or, SAT Score:					
	A copy	y of your ACT or SA	T score shee	et on official high school t	transcript required				
10	T '11 1	11 0.11							
10		be attending the follo	wing school	in the fall:					
	School	Į.							
	City:				e/Zip:				
			ent student e	enrollment from the above	e school is required prior to receipt o				
	funds.								
11	T		•						
11		 			ximate figures acceptable):				
	A	Tuition	Amount	\$					
	В	Books	Amount	\$					
	C	Room & Board	Amount	\$					
	D	Other expenses	Amount	\$					
	Е	Other expenses	Amount	\$					
	COMMENTS: Describe Other Expenses								

12	List other financial assistance you will receive per semester or quarter:								
	A	Personal	Amount	\$					
	В	Other Scholarship(s)	Amount	\$					
	С	Grants	Amount	\$					
	D	Student Loans	Amount	\$					
	Е	Other Financial Resources	Amount	\$					
	COMM	IENTS: Describe Other Schola	rship(s)/Fina	ancial Resources					
			1 ()						
Use additional space on reverse if you need more room to list financial information									
13	List yo	ur academic honors, awards, ar	nd membersl	hip activities while in high school:					
	3	,							
14	List yo	ur community/civic services ac	tivities, hob	bies, outside interests, and extra-curricular activities:					
15	Person	al Summary Statement: What a	are your pla	ans, professional goals/objectives, after graduation?					

<mark>16</mark>	<mark>A.</mark>	The following items must be attached to this application in order for the application to qualify to					
		be reviewed by the Scholarship Committee.					
	B.	Your application will be returned to you if your transcript, personal summary statement, or two					
		letters of recommendation are not attached to this application.					
	C.	Circle YES or NO to be sure you have attached each item					
YES	NO	Proof of college/nursing school acceptance or current student enrollment. A letter of					
		college/nursing school acceptance or program (acceptance is required for receipt of funds).					
VEC	NIO	Most recent OFFICIAL high school transcript. Distance are NOT A CCEPTABLE					
YES	NO	Most recent OFFICIAL high school transcript. Photocopies are NOT ACCEPTABLE.					
YES	NO	Written Personal Summary Statement					
1 LS	NU	Written Fersonal Summary Statement					
YES		Two (2) letters of recommendation. Return these completed in a sealed envelope from your					
	NO	teachers, administrators, clergy, employers, or counselors.					
STATEMENT OF ACCURACY							
Lhoro	by off	irm that all the above stated information provided by me is true and correct to the best of my					
	•	I also consent that my picture may be taken and used for any purpose deemed necessary to promote					
		for Nursing's scholarship program.					
tile iii	stitute	Tot Ivaising 8 sentiatismp program.					
I hereby understand that if chosen as a scholarship winner, I must provide evidence of enrollment/registration at							
the post-secondary institution of my choice before scholarship funds can be awarded.							
r							
Signature of scholarship applicant:							

REMINDER
Deadline is February 1, 2026
NO EXCEPTIONS

Date: _____