

Flo's Cookie Jar Grant Application

*Helping Student Nurses
Through Tough Times*



Dear Student: Please read the following information carefully. Before filling out and submitting the application make certain that you are eligible and follow application instructions.

Flo's Cookie Jar is a fund to help pre-licensure RN students who are facing a one-time personal financial emergency. The maximum that can be awarded to any student is \$ 2,000. Please ask for the minimum amount needed to cover the emergency or, if new to the RN program, to help pay for books or supplies. **This fund is not a general scholarship.** It is not intended to cover ongoing living expenses except in the presence of a documented one-time, short-term & unexpected emergency that puts you at risk for dropping out of the program. We may request supporting documentation; it is not required unless we ask for it. The content and privacy of information on unsolicited documents is solely your responsibility. Funds are donated and limited; we are not able to provide a grant to every applicant.

Eligibility to Apply:

You are eligible if you are:

1. A pre-licensure RN student enrolled in or entering an accredited California Registered Nursing Program;
2. In good academic and clinical standing; (verified by Dean or Director) and;
3. Experiencing a verifiable one-time personal financial emergency.

Application Directions (Student section):

1. Please print requested information on the top portion of the application (*Student Information*) completely and neatly.
2. Briefly and clearly describe the one-time situation or emergency.
3. **Briefly specify the exact amount you are requesting and the needs it will fulfill.** Please do not request more than you need for this emergency.
4. When you have completed your portion of the application take it to your Nursing Dean or Director to complete the bottom of the form (*Program Director*). **PLEASE NOTE:** You cannot ask a faculty member or clinical instructor to sign the application; it must go to the Dean or Director.
5. If you receive a grant, you must provide a brief description of how the grant helped you. Send the letter within two weeks to the California Nursing Student Association at the address or fax below.

Application Directions (Dean or Director)

1. Please review student information.
2. Fill in your name and contact information.
3. Sign the completed application and submit completed application by mail or fax to:

CNSA Foundation

P.O. Box 1047

Sacramento, CA 95812-1047

Fax: 916-552-2618

FLO'S COOKIE JAR GRANT REQUEST

Please review carefully



Student Information (please print clearly):

Name: _____ Address: _____ City: _____

Zip Code: _____ Daytime Phone #: _____ Email: _____

Age: _____ Marital Status: S M D W Gender: F M

GPA: _____ Expected Graduation Date and Degree: _____ Amount requested: _____

Brief description of your immediate emergency: _____

I verify that the above information is accurate and true to best of my knowledge.

Student Signature: _____

Program Director (please print clearly):

School Name: _____ Address: _____ City: _____ Zip Code: _____

Director or Dean _____ Title: _____

Phone #: _____ Email: (*required*) _____

Director/Dean Comments: (*please print clearly*): _____

The above information is true to the best of my knowledge. I expect the student to graduate.

Director/Dean Signature: _____

Important Information:

1. Incomplete and illegible applications are rejected.
2. If you describe needs totaling thousands of dollars, you need more help than we can provide. We specifically look for situations that can be fixed with small grants.
3. Flo's Cookie Jar provides help as soon as possible. The fund balance fluctuates over the year; in general, we help 2-3 students/month. We will contact you when a decision is made about your application. All decisions are final. You are welcome to reapply.
4. You may apply more than once if the \$2000 limit was not reached.
5. Flo's Cookie Jar grants are not competitive. The goal is to help every student who has demonstrated a genuine emergency need. However, there are times when applications exceed available funds. Should that happen, the criteria used may include the nature of the emergency, expected graduation date, and employment status. We will give students in their final semester priority.

For office use only.

4/08

Date Rcvd _____ Rcvd by _____ Faxed to AB Member _____ Date Approved/Denied _____ Amount _____