

***Helping Build the Future of Orthopaedic Nursing***

**Rothman Orthopaedic Nurse Scholarship**

The Rothman Orthopaedic Nurse scholarship has been established to financially assist a Rothman Orthopaedic Nurse with attendance at either the 2019 AAOS Allied Health Seminar or the 2019 NAON Annual Congress as well as a 1 year membership to NAON. The scholarship is geared towards an orthopaedic nurse who works at any Rothman-affiliated facility giving them a chance to experience the either the AAOS allied health Seminar or the NAON Annual Congress and all it has to offer.

**Scholarship:**

1. Scholarships of $1200 to cover early registration, will be awarded each spring to those members who meet the established criteria. One scholarship is awarded each year until funds run out.
2. Recognition in NAON and NAON Foundation media.

Applicants are asked to respond to all questions and responses should reflect their interest about being an orthopaedic nurse. Applicants who apply should be available to attend either the AAOS allied health seminar or the NAON Annual Congress in 2019.

**Eligibility:**

1. You have worked at a Rothman-affiliated facility at least 1 year.
2. You must currently be employed as a nurse in orthopaedics.
3. Must hold a current Orthopaedic Nurse Certification (ONC)

**You are ineligible if:**

1. You are a Current members of the NAON Executive Board, NAON staff and NAON Foundation Trustees are not eligible for this scholarship.

**Guidelines for completion:**

Any individual meeting the criteria and is interested in applying for this educational scholarship for NAON CONGRESS 2019 must complete the application and return by **March 15, 2019.**

**Criteria/Required Documentation**

1. Completed application form.
2. Proof of current ONC certification.
3. Proof of employment at a Rothman –affiliated facility.
4. A personal statement about being an orthopaedic nurse.
5. A letter of support from a Rothman Orthopaedic Surgeon
6. Only electronic submissions will be accepted.

All information is due to the NAON Foundation no later than March 15, 2019. Applicants will be informed of the Committee’s decision by April 1, 2019.

**Please submit to NAON Foundation Scholarship Administrator at:**

Luann Theis, Trustee, NAON Foundation

Scholarship/Grant Administrator

Please submit to: [scholarshipadministrator@naonfoundation.org](mailto:luannthe@msn.com)

Type or clearly print the information requested below.

Name and Credentials\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_

Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. When did you begin working in orthopaedics in your facility?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. List any NAON –related (local/regional) activities you participated in the past four years:
3. Hove you served as an officer on a committee for the local or national areas within NAON? Please explain and provide dates.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Are you involved with any work related committees, unit preceptor, unit educator? Please explain and provide dates\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Do you hold a Nationally recognized certification like ONC?\_What year did you become certified?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. What is your highest level of education? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Personal Statement:: In 300 words or less (typed and double- spaced) explain why you want to be an orthopeadic nurse/your personal statement about being an orthopaedic nurse.
8. References: Please submit a letter of support from a Rothman Orthopaedic Surgeon. Please also include their contact information below.
9. Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_

May we contact him/her for information if needed? Yes □ No □

*I understand that, if I receive a Rothman Orthopaedic Nurse Scholarship, I am required to apply funds received toward expenses related to either the 2019 AAOS Ailed Health Seminar or to the 2019 NAON Congress. I agree to return to the NAON Foundation any unused portion of the scholarship.*

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_