



# PEARLS OF THE IVY FOUNDATION

## 2020 SCHOLARSHIP APPLICATION

### “Dr. Ramonda Widemon Busby, RN, DNP, NEA-BC Excellence in Nursing Scholarship”

Do you have questions?

Please email Cynthia Lewis or Shronda Whitfield, Scholarship Committee Co-Chairs at [PIFscholars@gmail.com](mailto:PIFscholars@gmail.com).

**Application due date: Friday, May 1, 2020**

1. DEADLINE for scholarship applications is Friday, May 1, 2020. **(NO EXCEPTIONS)**
2. Refer to application process below for a list of the supporting documents needed (i.e., reference forms, evidence of GPA, etc.) Incomplete applications will not be considered.
3. If any question does not apply to you in this application please put N/A in the space.
4. Type or print legibly. Illegible applications will not be considered.
5. You will be notified by phone or mail in May regarding the status of your application.
6. If you have any questions about the application, please email Cynthia Lewis or Shronda Whitfield at [PIFscholars@gmail.com](mailto:PIFscholars@gmail.com).

**PURPOSE** The Pearls of the Ivy Foundation (PIF)/ Dr. Ramonda Widemon Busby, RN, DNP, NEA-BC Excellence in Nursing Scholarship was established in 2019. The mission of the scholarship is to provide financial assistance to exemplary high school students who are accepted by or current full-time students at an accredited college or university, preferably, Texas Woman’s University, University of Texas at Arlington, or Texas Christian University pursuing a degree in Nursing.

**FINANCIAL ASSISTANCE** is based on academic performance, leadership potential, and community involvement including but not limited to volunteer hours.

### **SCHOLARSHIP AWARDS**

The PIF awards scholarships utilizing a comprehensive rubric based process. Areas that are reviewed by the committee include, but are not limited to the following: Academic Accomplishments, Community Service, References, and Personal Essay. The foundation will remit scholarship funds directly to the recipient’s school. Scholarships awarded are based upon the availability of funds and additional qualifying criteria.

### **CRITERIA**

- African American graduating senior attending high school or graduated high school in the Dallas/Fort Worth area.
- Applicants must have verifiable proof of permanent residence status in the Dallas/Fort Worth area.
- Applicants must be completing or have completed high school successfully with a minimum GPA of 3.0 on a 4.0 scale.
- Applicants must be accepted as a full-time student at an accredited college or university for the upcoming 2020 – 2021 academic year. If scholarship money is awarded, this is the only program that will receive the funds on behalf of the applicant. Proof of enrollment will be required from the recipient.
- Applicants must be a citizen or legal permanent resident of the United States.

- Applicants must complete and submit a Scholarship Application by Friday, **May 1, 2020**.

## **TIMELINE**

- Applications are due by Friday, **May 1, 2020**.
- Applicants will be notified if awarded a scholarship by May 2020.

## **Application Process**

### **SCHOLARSHIP APPLICANTS MUST PROVIDE:**

- Completed application form.
- High school transcript or current University transcript.
- One-page list of community service and school activities.
- Three recommendations as follows:
  - One academic recommendation from a guidance counselor.
  - One academic recommendation from a teacher or principal.
  - One recommendation from an employer or other community member.
- Proof of acceptance at an accredited college or university, preferably, Texas Woman's University, University of Texas at Arlington, or Texas Christian University.
- Scanned application (pages 1-5) and all supporting documents into one PDF document.
  - School Official's Signature on Page 4 of application can be electronic or physical signature.
  - Multiple attachments will not be accepted, and application will be deemed incomplete.

**If you are a former recipient of this scholarship and are reapplying, please submit page 1 of the application, proof of enrollment, your unofficial college/university transcript, and community/university involvement for the preceding semester.**

- 1. Please do not resubmit your high school documents.**
- 2. Scan all documents into one pdf.**

**APPLICANT INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Telephone Number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

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**HIGH SCHOOL INFORMATION**

School Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Telephone Number: ( ) \_\_\_\_\_ Counselor Name: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

GPA: \_\_\_\_\_ ACT Score: \_\_\_\_\_ SAT Score: \_\_\_\_\_

Attach proof of GPA; your most recent **high** school transcript required. A copy of your ACT or SAT score sheet on official high school transcript is required.

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**POST HIGH SCHOOL GRADUATION INFORMATION**

Institution Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Enrollment Status: \_\_\_\_\_

Scheduled Date of Enrollment: \_\_\_\_\_

Major: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

Will you be a full time student: \_\_\_\_\_

Will you enter with any college credit? \_\_\_\_\_ If so, how many hours? \_\_\_\_\_

List expenses you expect to incur per semester or quarter: (Approximate figures acceptable). Make additional comments if needed.

Tuition:	Amount: \$
Books:	Amount: \$
Room & Board:	Amount: \$
Other expenses:	Amount: \$

List other financial assistance you will receive per semester or quarter:

Personal:	Amount: \$
Other Scholarship(s):	Amount: \$
Grants:	Amount: \$
Student Loan(s):	Amount: \$
Other Financial Resources:	Amount: \$

**COMMUNITY SERVICE & SCHOOL INVOLVEMENT**

Please attach a one-page list of volunteer activities and school activities in which you have participated. Indicate your role and the number of hours you have been involved (minimum \_\_\_ hours). Please include the name and contact number of the person certifying your participation in the listed activity. See example chart provided below.

Activity	Role	Time Involved	Contact Name	Contact Phone
Habitat Build	Participant	Three 8-Hour Saturdays	Mrs. Doe	(123) 555-4567
Feed the Homeless	Server	1 Saturday per quarter for 2 hours	Mr. Doe	(123) 555-1234
Peer Tutor	Math Tutor	10 hours per quarter	Mrs. Teacher	(123) 555-4566

Please attach two (2) letters of recommendation from non-family members describing the applicant’s involvement and accomplishments. One letter should describe the community service and the other letter should describe school activities and involvement from the guidance counselor. The letters should be signed and dated and included the individual’s contact information.

**SCHOOL OFFICIAL’S CERTIFICATION**

African American Graduating Senior attending High School in the Dallas/Fort Worth area. Please have this section completed by the High School Guidance Counselor.

Cumulative grade point average \_\_\_\_\_ on a 4.0 grade point scale.

School Official’s Name: \_\_\_\_\_

School Official’s Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

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**ESSAY TOPIC:**

Why do you feel it is important to pursue a career in nursing and how do you plan to impact healthcare once you complete your nursing degree?

**Essay Guidelines: Minimum 500 word typed essay. 1” margins, Font Style Time New Romans and Font Size 12.**

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**APPLICANT’S & PARENT’S CERTIFICATION:**

In submitting this application, I certify that the information provided is complete and accurate. I understand that falsification of information will result in disqualification of the application. I understand the application will be assessed based on the information provided and the submission of the application does not guarantee that I will receive a scholarship. I further agree, that in the event I am a scholarship recipient, this form also serves as a release to use my name, biographical information and excerpts from my application and related information in the press and other publications to promote the scholarship.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**APPLICANT CHECKLIST – (PLEASE DO NOT SEND ANY ADDITIONAL ITEMS)**

Be sure you have included all requested information. Incomplete applications will **NOT** be considered.

1. Complete Applications with appropriate signatures.
2. Include one-page list of community service and school activities.
3. Include 1 one-page recommendation letter verifying activities and involvement from guidance counselor.
4. Include 1 one-page recommendation letter verifying activities and involvement from teacher or principal.
5. Include 1 one-page recommendation letter verifying activities and involvement from an employer or other community member.
6. Include Minimum 500 word typed Essay. Contain 1” margins, Font Style Time New Romans, Font Size 12.
7. Include transcript with grade point average on 4.0 grade point scale.
8. Proof of acceptance at Texas Woman’s University, University of Texas at Arlington, or Texas Christian University.
9. School Official’s Signature on Page 4 of application can be electronic or physical signature.
10. Scan application (pages 1-5) and all supporting documents into one document.
11. Multiple attachments will not be accepted, and application will be deemed incomplete.
12. Application must be received by May 1, 2020 at PIFscholars@gmail.com.

**If you are a former recipient of this scholarship and are reapplying, please submit page 1 of the application, proof of enrollment, your unofficial college/university transcript, and community/university involvement for the preceding semester.**

1. Please do not resubmit your high school documents.
2. Scan all documents into one pdf and email to PIFscholars@gmail.com.