



Nursing Excellence Educational Award Application Checklist

Please use the scholarship checklist below to ensure all necessary documents and requirements are in order prior to submission. Incomplete submissions will not be considered and the applicant will be contacted in regards to fulfilling the scholarship terms. Please call the foundation at 605-322-4750 with questions and good luck!

Print Name: _____

Packet Submission Date: _____

Eligible Submission Packets must Include:

(please check the following)

- Application**
- Resume**
- Essay** (questions on application)
- Reference Letters**
 - Reference Letter #1
 - Reference Letter #2

Return Completed Packet To:
Foundation@Avera.org

Avera Foundation
P.O. Box 5045
Sioux Falls, SD 57117-5045
605-322-4750