



Estelle R. Ford
Future Nurses Scholarship



www.erffuturenurses scholarshipfund.org

SCHOLARSHIP APPLICATION

“It is with Passion our greatest work is achieved.”



Estelle R. Ford
1921 – 2016

A passionate and forward thinker, and mentor who loved her students, Estelle R. Ford had a love for helping and encouraging others to embrace their dreams and reach for excellence in their chosen field of nursing. Through countless acts of kindness, tremendous faith, a positive attitude in life, and an endless devotion to her students and others, Estelle changed the lives of those she touched.

Due to her passion for nursing, she created and sponsored the Future Nurses Club at Gardner High and took a personal interest in all the young women who joined and later became nurses, many having graduated from Henry Heywood School of Nursing.

The Scholarship's Pay It Forward Program was also created in 2016 to further Estelle's vision to help raise-up the next generation of leaders by encouraging scholarship recipients to help make a difference in their school or community through a leadership service project.

Operated by a non-profit foundation, the Estelle R. Ford Future Nurses Scholarship is completely dependent on donations. Scholarships are to be awarded annually to the North Central Mass area or who plan on serving their communities upon graduation. Candidates selected will demonstrate excellence in scholarship, character, leadership, and service.

*Community Foundation of Northern Central
Massachusetts*





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Future Nurses Scholarship



Scholarship Application

Name of Student: _____ Date of Application: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Yr. in school: _____ Current GPA: _____ (Preference will be given to students with a GPA of 3.0 and above.)

- Your interest in applying for this scholarship is appreciated. Please note that you must be a second year student in a two year nursing program or a third or fourth year nursing student in a four year program in order to apply. Additional criteria for this scholarship is that you are either from North Central MA, a surrounding community or attending a two or four year nursing program in one of the colleges in North Central MA. All candidates to be considered must complete this application form and participate in an “in person” or telephonic interview with members of the scholarship committee.
- The Estelle R. Ford Future Nurses Scholarship exists to encourage excellence in nursing, character, leadership and community service.
- A \$1,000.00 scholarship will be awarded to the qualified applicant who has completed a service project that conforms to the requirements of the "Pay It Forward" Project (see attached Pay It Forward document) associated with this scholarship. Awarded scholarships will be applied to the scholarship recipients' tuition during their senior year of college or toward their licensure.

Please provide the following information:

1. Describe, in one page, all extracurricular and/or community service activities you have been involved in (e.g., community service, sports, clubs, student government, recognized charities, clubs, or organizations).
2. Write a one page essay detailing your internship and practicum experiences in the nursing field. What are you doing in your life that reflects your passion for nursing and care of others.
3. Attach a letter of recommendation from a college professor, or a representative from the medical community or other health or community service organization who support your application for this scholarship.
4. Please fill out the attached Pay It Forward Photo and Name Release Form and submit it with this application.
5. If you have any questions about the application process, please contact Ms. Marjorie Fischer, Scholarship Committee Chair and send via email to: erfscholarship@gmail.com

NOTE: Please type essays in 12 pt. Times New Roman font. Once accepted, you will be contacted to set up an interview with the Scholarship Board. **Incomplete applications will not be considered.**





The Estelle R. Ford Future Nurses Scholarship Pay It Forward Program

Pay It Forward (PIF) Leadership Service Project

Scholarship candidates are required to complete a Pay It Forward (PIF) Leadership Service Project prior to receiving their scholarship. This service project emphasizes the value of service and leadership within the community, as well as developing compassion for others and other important skills.

Examples of projects that benefit the community might include hosting an informational workshop for high school students interested in a nursing career, volunteering at and/or assisting with activities at a local retirement or nursing home, volunteering at a shelter or food pantry for the needy, or providing clothing and supplies to shelters for homeless Veterans in your home community or around the North Central Mass communities. (Other acts of volunteerism will also be reviewed).

(While it is acceptable to involve others, it is important for the applicant to demonstrate their leadership skills in this project.)

Please describe the primary skills and tasks you think will be needed to complete a community service project:

Send completed application to: The Estelle R. Ford Future Nurses Scholarship, Attn:
Ms. Marjorie J. Fischer, Chair; 81 Church Street, Gardner, MA 01440
or Email to erfscholarship@gmail.com:

Applications are accepted throughout the year, but no later than Dec. 31.





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Photo Release Form

Permission to Use Student's Photograph

The Estelle R. Ford Future Nurses Scholarship and Pay It Forward Program may wish to use photographs of the student recipients in various forms of publicity. Any such photographs would highlight the student(s) either demonstrating learning techniques or participating in community program activities as they relate to the Estelle R. Ford Future Nurses Scholarship Program.

Only with the permission of the recipient will an individual's name be released with any photographs.

Student's Name: _____

___ I consent to the use of my photograph image (print, online, video, etc.).

___ I DO NOT consent to the use of my photograph image.

___ I consent to the use of my name with the release of any photographs.

___ I DO NOT consent to the use of my name with my photograph image.

Recipient's signature _____ Date _____

Email address _____

Phone number _____

