



Leslie Lancon Memorial Educational Hospice Nursing Scholarship

PURPOSE:

The annual scholarships will be awarded to support hospice and palliative care nursing excellence and education throughout Louisiana and Mississippi.

AWARD:

Louisiana Mississippi Hospice and Palliative Care (LMHPCO) will award six educational NBCHPN certification exam scholarships to **reimburse** the recipients for the cost of the NBCHPN Certification Exam. They will be awarded annually to: 1 RN (CHPN); 1 LPN (CHPLN); and 1 NA (CHPNA) per state (LA and MS).

The scholarships will be offered on an annual basis running from **April 1st to April 1st** of each year. The recipients will be selected and notified in June; two announcements will be made the first will be in LMHPCO's The Journal and the second at the Annual LMHPCO Leadership Conference.

REQUIREMENTS:

All responses must be typed in the online application. The application must be submitted online. Please print a copy of the application for your records. All recipients will be announced in the July LMHPCO Journal. Upon notification, all recipients will be required to submit a digital photo to the education director to be used in the announcement.

QUALIFICATIONS:

1. An employee in good standing of a **LMHPCO member**, with a minimum of two years of hospice experience.
2. May be a new or recertification applicant.
3. Must submit a completed NBCHPN Certification Exam Scholarship Application to the Education Chair of Louisiana-Mississippi Hospice and Palliative Care Organization (LMHPCO) by the April 1st deadline (all supporting documentation must be postmarked by April 1st).
4. Must submit a copy of the acknowledgement letter from the testing company indicating that the individual **passed** the certification exam.
5. Must submit one reference letter from a professional colleague.
6. Must submit a reference letter from the employer.

DEADLINE DATE:

The completed on-line application and supporting documentation must be submitted and postmarked to LMHPCO, by **April 1**. No faxed materials will be accepted. If you have any questions, please contact **Nancy Dunn, Director of Education by email at nancy@lmhpc.org**.

MAIL TO:

Nancy Dunn, Director of Education
LMHPCO Leslie Lancon Memorial Scholarship
PO Box 1999 Batesville, MS 38606.

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Please read the attached instructions before completing this application.
 This application is to be completed and submitted online.

Biographical Information

Full Name: _____ Credentials: ___NA ___LPN/LVN ___RN

Address: _____
 (Street/Apt. Number/P.O. Box Number)

City: _____ State _____ Zip _____

Home Phone: () _____ Work Phone: () _____

E-mail Address: _____

Experience:

1. Current employer: _____ Contact Person: _____

Employer Address: _____ Contact Number: _____

2. Years of hospice & end-of-life care experience: _____

1. Professional Education: Begin with basic nursing education.

Institution	Location	Degree/Diploma	Date of Completion
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Professional Experience: (List most recent position first)

Dates	Position	Patient Population	Institution	Location
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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Application Check List:

On-line application completed by April 1st

Supporting Documentation must be postmarked by April 1st:

Please ensure that each supporting document you submit has your name and certification category on it so that we can match it to your on-line application.

Submit a letter of reference from a professional colleague.

Submit a letter of reference from your employer.

Submit a copy of your acknowledgement letter from the testing company indicating that you **passed** the certification exam.

Mail supporting documentation to:

Nancy Dunn, Director of Education

LMHPCO – Leslie Lancon Memorial Scholarship

PO Box 1999 Batesville, MS 38606