

**STUDENT NURSING SCHOLARSHIP
MID-YEAR REPORT
(July 2021 – December 2021)**

**MAIL THIS REPORT TO YOUR DISTRICT PRESIDENT BY DECEMBER 10, 2021
DISTRICT PRESIDENT MAIL TO DEPARTMENT CHAIRMAN BY DECEMBER 20, 2021**

AUXILIARY NAME _____ **NUMBER** _____ **DISTRICT** _____

TO QUALIFY FOR AWARDS, SUPPORTING DOCUMENTATION (i.e. Reports/ Pictures /Newspaper Articles) MUST BE RECEIVED.

1. Did your Auxiliary participate in an “Honor the Nurses” activity? Yes____No_____

If so, on separate documentation, describe your activity in detail, include pictures, etc.

2. Did Auxiliary contact a local college regarding their nursing program? Yes____No_____

Name and Location of College_____

3. Did Auxiliary sponsor a Nursing Scholarship Candidate? Yes____No_____

Name of Student_____

College Attending_____

Auxiliary Chairman_____

(Please Print)

Phone Number_____Email_____

**“We Tip Our Hats To Vets”
“Soaring Above & Beyond”**