



**UNICO FOUNDATION, INC.
BERNARD AND CAROLYN TORRACO
MEMORIAL NURSING SCHOLARSHIP
2016-2017**

UNICO Foundation, Inc. will grant \$2,500 scholarships to students attending accredited prelicensure or graduate nursing programs in the United States.

ELIGIBILITY

1. **Citizenship**—The candidate must be a United States citizen. This program is open to applicants of all ethnicities.
2. **Sponsorship**—An applicant must reside in the home state of an active UNICO Chapter. Every UNICO Chapter, in good standing, may sponsor candidates for each of the UNICO Foundation scholarships. Applications may also be submitted through the District Governor or the UNICO National Office.
3. **Educational Requirements**—A candidate must be currently enrolled in an accredited campus based nursing degree program in the United States, completing core nursing courses, at one of the following: An Associate Degree School of Nursing; A Collegiate School of Nursing; A Diploma School of Nursing. The candidate must have a minimum grade point average of 3.0. Proof of enrollment must be provided prior to issuing the scholarship award check.
4. **Financial Need**—Preference is given to applicants demonstrating financial need. A current FAFSA Student Aid Report (SAR) or the previous year income tax return is required.
5. **Extra-Curricular and Community Participation**—The extent to which a candidate has contributed to the life and welfare of school and community, including health activities and student nursing organizations, will be considered in the assessment of merit.
6. **Family Members**—UNICANS and their family members may apply through their respective chapters.
7. **Timeframe**—The candidate must pursue their study within the year of the scholarship grant; any deviation will result in forfeiture.
8. **Reapplication**—Previous candidates, including recipients, are eligible to reapply provided they have demonstrated academic progress. In this event, a complete and updated application must be submitted.

STANDARDS FOR CONSIDERATION

In addition to the criteria previously listed, applications will be judged on citizenship, leadership, character, community service and commitment. Exhibits evidencing notable achievements in these areas may be attached. Remove all letters from envelopes and bind the letters flat. The applicant should avoid submitting repetitious accounts. Responses requiring extra space should be typed on separate 8½ x 11 sheets of paper.

Along with the Scholarship Grant Application, we require the following:

1. Two letters of recommendation: one from a school official and one from a member of the community, not affiliated with the school
2. An official transcript showing the most recent grades. (May be sent separately.)
3. A narrative describing specific nursing career objectives.
4. A Chapter letter of endorsement and presentation may be included. (Optional)

Applications that do not conform to the foregoing requirements will not be considered.

ADDITIONAL CONDITIONS

The UNICO Foundation, through this program, seeks students of outstanding merit who show appreciation for the value of an education and are willing to achieve success. It is to be noted further that along with the maintenance of the required college scholastic standards as a condition precedent in awarding the scholarship, the National Director of Scholarships and UNICO Foundation, Inc. Trustees reserve unto themselves the right to cancel or otherwise terminate a grant at any time an awardee, in their opinion, directly or indirectly engages in undesirable activities. The National Director of Scholarships and UNICO Foundation Trustees need not assign any reason for their action and the awardee shall have no recourse.

FILING OF APPLICATIONS

The application must be signed by a school official and presented to the UNICO Chapter or National Office Representative prior to April 15.

Incomplete, altered, outdated, or unofficial applications will not be accepted.

Applications must be submitted as hardcopies.

All signatures are mandatory.

Online degree programs are not eligible for UNICO scholarships.

The scholarship must be applied to the 2017-2018 academic year.

A recipient must submit the scholarship agreement, and a bursar's receipt confirming enrollment, prior to payment of award.

Candidates must reside in the home state of an active UNICO Chapter.

Only the winners will be notified. Results will be posted on the UNICO National Website: www.unico.org

Recipients are required to submit a photo upon notification.

For security purposes, do not include a Social Security Number.

Must be filed prior to April 15 with the UNICO Chapter Representative or directly with the National Office.



UNICO FOUNDATION, INC.
Bernard and Carolyn Torracco Memorial Nursing Scholarship

Must be filed prior to April 15 with the UNICO Chapter Representative or the UNICO National Office.

Please Type or Print

Student's Name: _____
Last First Middle

Student's Address: _____
Street City State Zip

Date of Birth: _____ Phone () _____

E-mail: _____

THIS SECTION TO BE COMPLETED BY SCHOOL ADMINISTRATOR

School Name: _____

School Address: _____

Degree Objective: _____

Start Date: _____

Expected Completion Date: _____

Grade Point Average: _____

Name and Title of Administrator: _____

MANDATORY

Administrator's Signature: _____ Date: _____

Answers requiring additional space must be continued on separate 8 ½ by 11 sheets.

1. Honors and awards pertaining to current studies. **List chronologically with dates received.**

Academic: _____

Non-Academic: _____

2. Participation in extra-curricular activities, relating to nursing school organizations (offices held, etc.). **List chronologically and date.**

3. Personal and community (including employment) activities conducted out of school (offices held, etc.). **List chronologically and date.**

4. Indicate other nursing scholarships awarded and the dollar amount received.

5. In narrative form, on 8½ x 11 paper, describe your interests, objectives, achievements, qualifications, and commitment to the pursuit of a nursing career.

6. Financial need is a serious consideration. **Attach a copy of the FAFSA Student Aid Report (SAR)** issued for the current academic year and so dated or **your previous year income tax return.**

I hereby confirm that I am a citizen of the United States and certify that the information submitted on this application is accurate.

Date Signature of Applicant

Date Signature of UNICO Representative

Chapter State