

Robyn O. Begley Nursing Scholarship

Purpose:

The Robyn O. Begley Nursing Scholarship was established in 2019 to honor the legacy of former AtlantiCare Chief Nursing Officer, Robyn O. Begley. Robyn started AtlantiCare in 1983 as a nurse in the maternity ward, and moved into many roles, eventually becoming Chief Nursing Officer. She left the organization in 2018 to pursue the dream of a lifetime, advocating and advancing the career nursing at the highest level, as Chief Executive Officer of the American Organization of Nurse Executives and Senior Vice President and Chief Nursing Officer of the American Hospital Association.

Award Description:

The intention of this scholarship is to ease the financial burden and assist individuals in achieving their goal of pursing an advanced nursing degree. Scholarships will be awarded to students enrolled in MSN, NP, and DNP program.

Eligibility:

- Applicants are limited to AtlantiCare nurses.
- The scholarship recipient must have previously maintain a cumulative GPA of 3.0 in any prior nursing degree program.
- Scholarship recipients must have applied and been accepting into an accredited advanced nursing program.
- Applicants must submit a complete application form along with a two-page essay and all supporting documents by April 11, 2025.

Terms & Conditions:

Scholarship recipients must be enrolled and attend an accredited college or university with tuition responsibilities in the academic year following their selection. Verification of enrollment is required. Scholarship funds will be paid directly to the accredited college or university in which the student is enrolled. The scholarship can be used to offset any monies owed by the recipient to the school of their choosing, even after tuition reimbursement is applied. Scholarship funds will not be paid directly, nor reimbursed, to an award recipient. Scholarship funds can be applied toward tuition fees or book purchases and other appropriate educational expenses, as determined by Robyn O. Begley Nursing Scholarship Committee.

Supporting Documents:

Along with a completed application form and essay, interested applicants must also submit the following:

- Proof of a completed BSN program.
- Verification of enrollment in an advanced nursing degree program
- A letter of support from their immediate supervisor or other AtlantiCare nursing leader.

Certification & Release:

All applicants must sign the attached application, certifying that all information is true and complete to the best of their knowledge. Upon submission of the completed application, applicants grant AtlantiCare the right to use any information contained in the application for the purpose of promoting and publicizing the fellowship program.

Funding Information:

A total of one scholarship, in the amount of \$5,000, will be awarded annually. Recipient will be recognized during 2025 Nurse's Week.

Submission of Application:

All complete applications must be received by **April 11, 2025.** Incomplete applications will not be considered. Applications and supporting documents can be sent to:

AtlantiCare Foundation Attn: Alexis Cannella 1809 Pacific Ave Atlantic City, NJ 08401

Completed applications can also be emailed to alexis.cannella@atlanticare.org (an acknowledgement will be emailed to the applicant upon receipt).



Application for the Robyn O. Begley Advanced Nursing Scholarship

Applicant Name:
Mailing Address:
City/State/Zip:
Applicant Email Address:
Applicant Phone Number:
Applicant Clock Number:
Current AtlantiCare Department:
Current AtlantiCare Position:
Name of school and nursing program that the applicant is currently enrolled or plans to enter:
Anticipated graduation date:
The applicant must complete the Robyn O. Begley application. Applications must be signed and dated in the space provided. <i>Incomplete applications will not be processed</i> .
<u>Supporting Documents</u>
1. Essay & Statement of Need: The applicant must submit an essay addressing the following:
 Why do you want to pursue an advanced nursing degree? Upon successful completion of an advanced nursing degree program, what does your
future look like?
3. How will you apply your degree?
2. Enrollment Verification: Please provide verification of enrollment.
3. Transcripts: Additionally, please provide verification of enrollment and a copy of transcripts from
other nursing degree programs that you might have completed.
ALL OF THE INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I HEREBY GIVE ATLANTICARE PERMISSION TO USE MY NAME AND PHOTOGRAPH FOR THE PURPOSE OF PUBLIC RELATIONS AND PUBLICATIONS. NOTE: ALL INFORMATION SUBMITTED WILL BE HELD CONFIDENTIAL UNLESS OTHERWISE NOTED.
Applicant Name (print)

Signature ______ Date_____