



# Illinois Pioneer Coalition

## Scholarship Program

**Applications for the 2021 scholarships are now being accepted. To be considered for an award, submit your application by December 15, 2020.**

### Required Eligibility and Criteria Documentation for application

1. Must be a someone who is currently employed in a Long-Term Care Community (either full-time or part-time) who is looking to further their education in healthcare
2. Must be committed to advancing your education with a focus on caring for older adults (e.g. in a degree program or certification)
3. Required documentation
  - Must submit the following to be considered for this scholarship:
    - a. An essay describing your interest in caring for older adults and working with older adults in long term care; include how you became interested in caring for older adults (1-2 pages)
    - b. A description detailing your educational plan that includes:
      - the college or organization/agency through which you will receive your degree or certificate
      - If appropriate, a copy of the letter of acceptance from the nursing school or agency
      - Plans for funding your education
    - c. Letter of Recommendation from your supervisor, professor, or facility Administrator/Director of Nursing that demonstrates support for your educational plan

## Vivian and Mary Tellis-Nayak Scholarship - 2021

### **Applicant Information:**

Full Name:

Date:

Address:

City, State, Zip:

Phone:

If you currently hold a license/certification in a health care field, please indicate:

### **Current Employment:**

Place of Employment:

Phone Number:

Address:

City, State, Zip:

Current Position:

Administrator:

Director of Nursing:

Supervisor:

Years of experience in caring for older adults:

Type of educational program attending:

Name & Address of the School or Program:

Start date of educational program:

Estimated completion date:

**Please respond to the following questions:**

- 1) I would like to advance my knowledge in working with older adults because:
- 2) Describe a situation in which you connected with an older adult in your workplace and how you improved quality of life for that person:
- 3) Describe your future plans in the healthcare field and your commitment to delivering quality care for older adults:

Terms of Agreement: The Illinois Pioneer Coalition will award up to a \$1000.00 provisional scholarship to the applicant for above mentioned educational program. Applicant is required to pay for their education first and then submit receipt of payment in order to receive the scholarship funds.

If you have any questions about this application, please contact:

Lisa Meyer, MBA, PT  
[Schorb\\_meyer@yahoo.com](mailto:Schorb_meyer@yahoo.com)

Leslie Pedtke  
[leslie.pedtke@kingmgt.com](mailto:leslie.pedtke@kingmgt.com)

*I understand and agree with the terms of the Agreement, Eligibility and Criteria Requirements, and Negotiated Timeline and wish to be considered for the Illinois Pioneer Coalition Scholarship.*

Applicant Signature:

To submit application, including Letter of Recommendation, either scan and email to Lisa Meyer (above) or mail to:

Lisa Meyer  
4215 FF Road  
Columbia, IL 62236