***Illinois Association of School Nurses’ Foundation***

***5567 Pepper Dr. Rockford, IL 61114***

***IASNFoundation.contact@gmail.com***

***Linda Kimel– President Susan Kruckman –Member-at-large***

***L. Lynn Rochkes – Vice-President         Michelle Maurer  – Member-at-large***

***June Oney – Sec./Treasurer***

**IASN FOUNDATION ACHIEVEMENT AWARDS**

The IASN Foundation promotes school nurses involvement in professional activities. To honor professional achievements, the IASN Foundation offers two $150 award annually to IASN members. These awards recognize achievements that impact school nursing or the health of children/youth. Achievements can consist of things such as: writing an article for publication in a professional journal, conducting a quality improvement project, developing and implementing a school program, developing and implementing a school based project, accomplishing a special project for IASN, first time oral presentation at the NASN conference.

The achievement must have been completed within 24 months of the application deadline.

**To Apply:**

* Complete the application form (attached)
* Write 1 to 2 pages explaining the achievement including a description of the achievement, outcome of the project/activity, and how achievement contributes to school nursing.
* Use 1 inch margins, double spacing, minimum of 12 point font when writing about the project.
* E-mail the application form as an attachment and written pages explaining the achievement to: IASNFoundation.contact@gmail.com
* **DEADLINE: Midnight September 1**

**IASN FOUNDATION ACHIEVEMENT AWARD APPLICATION FORM**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credentials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title/position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NASN/IASN Membership #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highest Degree Held: \_\_\_\_\_\_\_\_\_\_\_\_\_ University/College:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Achievement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Achievers (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Achievers Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Achievers Phone: Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ work\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Achievers e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT.

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 Signature of Applicant Date

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 Signature of Co-Applicant Date