

Karen Eltringham Excellence in Nursing Scholarship



Karen Eltringham, a beloved long-time resident of Athens, PA, dedicated her life to caring for others with unparalleled compassion and empathy. A proud graduate of the Robert Packer School of Nursing in 1981, Karen spent 43 years serving patients and the community as an ICU and Cardiac Cath Lab nurse. Her unwavering dedication and fierce advocacy for her patients earned her the admiration and respect of all who knew her. Karen's love for her family was boundless, and she cherished every moment spent with her husband, children, and grandchildren. Deeply committed to her community, Karen's caring nature extended far beyond her profession, touching countless lives with her kindness and generosity. In memory of

Karen Eltringham's unwavering dedication and compassion, this nursing scholarship has been established to support aspiring nurses who share her commitment to patient care, compassion and empathy.

Eligibility Criteria:

- Graduating senior from Athens Area School District, Athens, PA.
- Accepted into an accredited two- or four-year technical school, college, or university and pursuing a degree in the field of nursing.
- Have demonstrated financial need.
- Must have earned at least an 80% grade point average while in high school
- Must have personal characteristics suitable for an effective career in nursing. (Compassion, Empathy, Patience and Integrity)
- Write an essay (200 – 250 words double spaced) that describe a time in your life when you demonstrated empathy, compassion, and dedication while helping someone in need. How did you approach the situation, and what impact did your actions have on the individual and yourself? Reflect on how these qualities will shape your approach to nursing.
- Please provide a list of school-based activities (including leadership positions, clubs and athletics) as well as community volunteer activities and the number of months or years.

Please see your guidance office for deadlines.



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School Based Information:

Major Field of study in college: _____

Name of the college or university you will attend:

G.P.A. _____ SAT Score _____ or Act Score _____

Class Rank _____ of _____ # students.

Financial Information:

Please enter your Student Aid Index (SAI) number, which is generated after completing your Free Application for Federal Student Aid Form (FAFSA): _____.

If this number is not available at the time of submitting the application, please provide details as to the status of FAFSA. Please notify us when the number becomes available.

Number of Dependents in Family: _____

I attest that all personal data included within this application is truthful and in no way misleading. All contents have been completed entirely by me (the applicant) to the best of my knowledge.

If I am selected as a recipient of a Community Foundation for the Twin Tiers scholarship, I agree to permit the Foundation to confer with my school to verify my continuing enrollment during the term of my scholarship.

I also agree that my name and photograph can be used in announcements made by the Community Foundation for the Twin Tiers regarding the scholarship (s) for which I have been awarded.

I also agree that by signing this I permit my school to give the Community Foundation for the Twin Tiers information regarding my SAT scores, current GPA and class rank.

Awards may be used at any accredited college, university, or technical school within the United States.

Signature of Applicant

Date of Signature