



Nebraska Infection Control Network Scholarship Application Form

Purpose: The Nebraska Infection Control Network offers a limited number of scholarships to defray course registration fees for applicants whose attendance may be compromised by financial issues.

Applications must be received by no later than 1 month prior to the starting date of the course.

Persons eligible to apply for a scholarship must:

- ✓ Be actively functioning in an infection control capacity
- ✓ Be a currently licensed RN, LPN, or Medical Technologist

Scholarships provide for course registration fees to be waived. No other payment of expenses is provided.

Please complete the following:

Preferred Primary Infection Prevention Course Dates: _____

Applicant's Name: _____

Applicant's Email Address: _____

Applicant's Phone Number: _____

Facility Name: _____

Facility Address: _____

City: _____ State: _____ Zip Code: _____

Position Held: _____

Length of time in position: _____

Percent FTE devoted to Infection Control: _____

List past attendance at Infection Control training (name/date/location): _____

Chief Administrator and/or supervisor: _____

Phone: _____

Please explain briefly reason you are applying for this financial scholarship; you may attach additional pages if desired: _____
