

**KAY ELLIS NURSING SCHOLARSHIP FOR WOMEN  
2014-15 APPLICATION PACKET**

Dear Nursing Student,

We are pleased to provide this scholarship opportunity for student nurses in honor of Kay Ellis, who dedicated her life to helping others and the nursing profession. Three to five scholarships of up to \$2,500 per semester will be offered. The application deadline is April 11, 2014.

So you ask, who was Kay Ellis?

Kay Ellis was a unique individual born in New Jersey in 1900. She came to San Francisco in 1917 as an accomplished swimmer where she attempted to swim the Golden Gate. In those days marathon swimming was big news and there was no bridge. She subsequently swam many difficult challenges in Alaska, Southern California and Florida. After returning to New Jersey she became a registered nurse and worked in New York. In the late 1920's she traveled to Europe, married and returned with her new spouse, Dr. Sogemeier, to live in Burlingame.

After divorcing in 1932, she resumed her nursing career and accompanied an ailing Chinese gentleman to China. She remained in Singapore until the Japanese invasion when she returned to work in Hawaii. After the war she traveled through Europe and Africa where she became deeply interested in the plight of the blacks. She was expelled from three African countries for her actions against apartheid.

She returned to Burlingame in the late 1940's where she became an outspoken critic of racial injustice. One of the hot issues at the time was integration of public swimming pools. She built a pool in her backyard (without city permits) and invited numerous black friends. To the dismay of her neighbors, her home saw a constant parade of people of all nationalities and races. Needless to say she had numerous court battles and a memorable one was for sunbathing nude around her pool. It was thrown out of court when it was pointed out that neighbors had to climb a ladder to observe.

Kay never drank alcoholic beverages but took such interest in alcoholics that she attended all AA meetings at St. Matthews's church. Every holiday she worked at the St. Anthony dining room to feed the homeless and made frequent trips there to help out.

Because of her foreign travel she took an interest in foreign students and had numerous foreign visitors in home. She sponsored several young girls in Beirut, Sweden, Yugoslavia, and Guatemala to live in the U.S.

Her concern was always to help the less fortunate and to that end she left a sum of money for scholarships in hopes that you too can carry on in that light.

**KAY ELLIS NURSING SCHOLARSHIP FOR WOMEN  
2014-15 APPLICATION GUIDELINES**

In honor and recognition of Kay Ellis' legacy of compassion and service to others in need, this scholarship is intended to help low-income female students with preference given to single parents, recent immigrants and students of color in their pursuit of an Associates or Bachelors Degree in Nursing.

**General eligibility:**

- Female students must have a minimum 3.0 grade point average and be enrolled in or planning to enroll in an accredited undergraduate nursing program.
- If selected for a scholarship, recipients must be enrolled at least half time (6 or more units) in degree-applicable units for program.
- Applicants must be attending a nursing program in San Mateo, San Francisco and/or Santa Clara counties. Applicants need not be a citizen of the United States to apply.

**When submitting your application, please include the following documents:**

- Completed Application Form (pp 3 – 4 of this packet)
- Personal Statement: Not to exceed two pages, typed and double-spaced pages. Statement should include career plans for the future, further schooling needs, reason why nursing career is important to you and any information or special circumstances that you feel is important to share with the scholarship review committee.
- Transcripts from all schools attended in the past two years (unofficial transcripts ok - may be sent separately and directly from school or included with this packet).
- Copy of your 2014-15 Free Application for Federal Student Aid (FAFSA) Student Aid Report (SAR) or 2014-15 California Dream Application SAR.
- Two (2) letters of recommendation from any of the following sources: school official or teacher, employer, clergy person or supervisor of a volunteer organization.

**Please note incomplete applications will not be accepted**

**ALL INFORMATION IS CONFIDENTIAL**

Applications should be typewritten or printed and submitted by 12 noon on April 11, 2014 to:

**Cañada College  
C/O Financial Aid Office  
4200 Farm Hill Boulevard  
Redwood City, CA 94061**

Questions should be directed to Mr. Walter McCullough at [mystkbrkr@comcast.net](mailto:mystkbrkr@comcast.net)

**APPLICATIONS RECEIVED AFTER APRIL 11, 2014 WILL NOT BE ACCEPTED.**

The following steps and time frames outline process:

<b>STEPS</b>	<b>WHEN</b>
Applications submitted	March 15 – April 11
Application screened and Finalists interviewed by Scholarship Committee	April - May
Awards announced	May – Early June
Funds disbursed for school year August through July	August through July

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**Personal Information** Please type or print

Name \_\_\_\_\_ Today's Date: \_\_\_\_\_

Marital Status - Circle one:   Single   Married   Divorced   Widowed   Domestic Partnership

Legal Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_ Birthdate \_\_\_\_\_

List any volunteer/community service work within the past three years: \_\_\_\_\_

\_\_\_\_\_

**Academic Information**

Presently Attending \_\_\_\_\_

Current grade level or total semester units completed \_\_\_\_\_ GPA \_\_\_\_\_

Number of completed units that apply to nursing program \_\_\_\_\_ GPA \_\_\_\_\_

School planning to attend in the fall 2014 semester/quarter \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Student status for the coming year: Full-time - # of units \_\_\_\_\_ Part-time - # of units \_\_\_\_\_

Expected Degree (RN/LVN - AS, BS, MS Degree): \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

In which area of health career? (i.e., RN, LVN, OT, PT, etc.) \_\_\_\_\_

Have you been accepted into the healthcare program? Yes    No (If no, when?) \_\_\_\_\_

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**ESTIMATED BUDGET FOR SCHOOL YEAR**

PLEASE NOTE: The amount you list below should be expenses for the school year. Example: If you are attending Fall and Spring semesters of the funding year, the total amount listed should be for both semesters. If you are attending only the Fall or only the Spring semester of the funding year, only show the amount needed for that semester. Summer sessions of the following year can be considered.

	School of choice #1	School of choice #2	School of choice #3
Name of school			
Tuition/Fees			
Books			
Supplies			
Uniforms			
Dormitory (Room and Board at school if living away from home)			
Other expenses (explain)			
<b>Total School Expenses</b>			

Funds you have for school

Funds from School \_\_\_\_\_

Family Contribution \_\_\_\_\_

Student Savings \_\_\_\_\_

Scholarships \_\_\_\_\_

Loans \_\_\_\_\_

Other Funds \_\_\_\_\_

Total Funds you have for school \_\_\_\_\_

Amount needed for tuition/fees/books/supplies/ uniforms \_\_\_\_\_

Amount needed for other expenses (Dorm, etc.) \_\_\_\_\_

**I certify that the above statements are true to the best of my knowledge.**

**Signature of student:**

Student \_\_\_\_\_ Date \_\_\_\_\_