

To: Shore Medical Center Staff

From: Alan L. Beatty, MBA. Vice President/Human Resources

Date: March 16, 2021

Subject: Previti Family Scholarship for Nursing Education

It is my pleasure to announce the continuation of the Previti Family Scholarship for the 2021 calendar year. This scholarship is to assist Shore Medical Center staff in their pursuit of a Bachelor of Science Degree in Nursing, made possible by the generous donation of the Previti family. Recipients of the Previti Family Scholarship will receive up to \$2,000 per year as they work to complete their BSN.

This scholarship applies to any Shore Medical Center employee who:

- Resides in Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean, or Salem counties
- Earns six (6) or more credit hours per semester at an accredited institution
- Demonstrates financial need

Recipients will continue to receive their award each academic year up to four years, provided they maintain a minimum grade point average of 3.0. To apply for this scholarship, candidates must submit an application, resume, and cover letter to Scholarship Coordinators. The screening process will include an interview with one of the program coordinators.

The Previti Family Scholarship Fund is made possible by a gift from the Lucille Previti Lupton Foundation, Inc. This family has a long history in the Somers Point community, having operated the popular Mac's Restaurant for more than 50 years. On behalf of the Senior Leadership Team, I thank them for their generosity and commitment to supporting educational opportunities for our nursing professionals

To learn more about the Previti Family Scholarship, or to apply for an award, please contact Human Resources.

Previti Family Scholarship Application

Empl #: \_\_\_\_\_

Employee First Name: \_\_\_\_\_ Employee Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Department: \_\_\_\_\_ Department#: \_\_\_\_\_

Job Title: \_\_\_\_\_

Educational Institution: \_\_\_\_\_

Institution

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

Are you currently enrolled in a BSN program at the above listed institution Yes or No

Are you receiving financial assistance? Yes or No

If yes, please describe \_\_\_\_\_

SMC Committee, Community or Volunteer Involvement and Experience:

\_\_\_\_\_  
\_\_\_\_\_

Essay Requirement: Minimum one page letter indicating career aspirations, how receiving the scholarship could impact role at SMC, demonstrates financial need

Additionally, please enclose the following:

- Cover Letter
- Current Resume
- 1 Letter of Reference
- Program Documentation
- Proof of enrollment
- Invoice (If available)