



Our Mission

NAHN is committed to advancing the health in Hispanic communities and to lead, promote and advocate the educational, professional, and leadership opportunities for Hispanic nurses.

Objectives:

1. Provide a forum for nurses to analyze and evaluate the health care needs of the Hispanic community.
2. Promote the safety and the quality of health care delivery services for the Hispanic community
3. Identify barriers in the implementation and delivery of health services to Hispanic consumers and recommend appropriate solutions to local, state, and federal agencies.
4. Develop, test, and promote culturally sensitive models of intervention that provide effective nursing care for Hispanic communities.
5. Disseminate research findings and policy perspectives related to Hispanic health care needs to local, state, and federal agencies in order to impact policy making and the allocation of resources.
6. Disseminate research findings related to Hispanic population to increase awareness of the specific health care needs of Hispanics.
7. Advocate for policy changes and perspectives- related to Hispanic health care needs- to local, state, and federal agencies in order to impact the allocation of resources for the Hispanic population.
8. Collaborate with, and provide assistance to, other Hispanic health care professionals in meeting each other's established goals.
9. Represent in voice and action the number of licensed Hispanic nurses in the US.
10. Serve as consultants in providing culturally sensitive services to Hispanic consumers (patients, nurses, and students).
11. Identify barriers to quality education for Hispanic nursing students and recommend appropriate solutions to state, local, and federal agencies.
12. Promote the recruitment and retention of Hispanic students in nursing education programs, in order to increase the number of bilingual and bicultural nurses who may provide culturally sensitive nursing care to Hispanic consumers.
13. Advance the educational, professional, and leadership skills of Hispanic nurses in order to increase the number of Hispanic researchers, administrators, and educators.

The National Association of Hispanic Nurses (NAHN) Miami Chapter is pleased to announce its Annual Scholarship. NAHN's Executive Board is currently accepting applications from students for the **Spring 2019 Nursing Scholarship Awards: NCLEX Scholarship Grant**. Eligible students will receive a one-time scholarship, which will be awarded during your college or university's pinning ceremony. **Deadline for Submission is April 12, 2019.** Please email all application materials and transcripts to: miaminahn@gmail.com

Criteria for applicants are as follows:

1. The student must be a member of NAHN. Can join at <http://www.nahnet.org/>
2. The student must be already enrolled in a Nursing program.
3. The student must have a minimum cumulative grade point average (GPA) of 3.0. An official transcript must be submitted with the scholarship application.
4. The student must submit a written essay detailing need and future goals. Application and transcripts must be emailed to miaminahn@gmail.com.
5. The student must commit to volunteer in at least 20 hours of NAHN organized activities within 3 months of being awarded the scholarship. Student will have one year to complete service agreement.



PERSONAL INFORMATION (No Names on Essays)

NAHN MEMBER NUMBER: _____

Student Name: _____ Address: _____ _____	
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B. PLANS FOR STUDY

College or University of Attendance (REQUIRED): _____ County of College or University _____	
Beginning Date: _____	Expected Graduation Date: _____
Attendance: _____ Part-time _____ Full-time	
What nursing degree are you pursuing? <input type="checkbox"/> Associate degree <input type="checkbox"/> BSN (basic student; not yet licensed as RN) <input type="checkbox"/> BSN (RN to BSN)	
What is your future area of specialty or focus (if available): _____	
GPA of last semester in nursing program: _____	

C. EDUCATIONAL HISTORY

SCHOOL	CITY/STATE	DATES ATTENDED	DEGREE/ DIPLOMA

D. EXPERIENCE

List employment for the past 5 years, beginning with the most recent

EMPLOYER (CITY/STATE)	MAJOR RESPONSIBILITIES	DATES



Statement of Need

Please compose a statement not exceeding one single-spaced page, stating why it is necessary for you to receive an NAHN scholarship. Do not include your name or which University/College you are from on this form.

Please put your NAHN Member Number here : _____



Goals and Potential for Contribution

Please compose a statement, not exceeding one single-spaced page, stating your goals and your assessment of your potential for contributing to nursing and society. Do not include your name or which University/College on this form.

Please put your NAHN Member Number here : _____