

**LAUREN MICKOOL AND ROBERT GREENWALD LOVE OF HUMANITY
SCHOLARSHIP APPLICATION**

Name: _____

Address: _____

City, State & Zip: _____

Cell Phone: _____ **E-mail:** _____

Department: _____ **Extension:** _____

Education Background:

College/University: _____

Years Attended: _____ **From:** _____ **To:** _____

Other Education: (please explain)

Number of years as RN at NHMC: _____

Name of Supervisor: _____

Please provide a personal statement: (Maximum 200 words)

- How do you demonstrate love of humanity in your nursing care?
- How do you advocate for patients and patient families emotionally, spiritually and culturally?

Application is due by Wednesday, April 28, 2021. Please mail or deliver to the address listed below:

Brian Hammel, President
Northridge Hospital Foundation
18300 Roscoe Blvd. Northridge, CA 91328

Brian.hammel@dignityhealth.org