



**Central New York Region of the  
Society of Gastroenterology Nurses and Associates  
C N Y S G N A  
EDUCATIONAL GRANT  
APPLICATION**

The Central New York Region of the Society of Gastroenterology Nurses and Associates (CNYSGNA) is currently accepting applications for grants to be used for the SGNA Annual Course. Information about the upcoming SGNA Annual Course can be found online at [\[http://www.sgna.org/Education/events.cfm\]](http://www.sgna.org/Education/events.cfm).

Individuals eligible for the grant application must meet the following requirements:

- Actively support the CNYSGNA in function and philosophy.
- Apply in writing in a professional and legible manner stating his/her intention to attend the meeting, goals, and objectives and what he/she has contributed to CNYSGNA.
- Read and agree to the Policy and Procedure for Educational Grants listed on the CNYSGNA Web site [\[http://www.cnysgna.org/scholarships.html\]](http://www.cnysgna.org/scholarships.html).

The letter of interest and the grant application must be received no later than January 31 of the upcoming SGNA Annual Course. Please mail the letter of interest and grant application to the scholarship officer and address listed on the CNYSGNA Web site [\[http://www.cnysgna.org/officers.html\]](http://www.cnysgna.org/officers.html).

E-mail questions or requested materials to: [scholarship@cnysgna.org](mailto:scholarship@cnysgna.org)

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**Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home phone:** \_\_\_\_\_ **Work phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Place of employment:** \_\_\_\_\_

**Work address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Accumulation of points:** \_\_\_\_\_ **Date:** \_\_\_\_\_