

## The Roberta M Tutt Nursing Scholarship

The Health Services Foundation (HSF) is excited to facilitate this educational funding opportunity for northwest Oklahoma residents who have a passion for nursing.

The Roberta M. Tutt Nursing Scholarship was established to honor the memory of Roberta Maxine (Hayes) Tutt. Roberta was born in Wichita, Kansas in 1922, and raised and educated both there and on a cattle ranch in Harper County, Oklahoma. She graduated from Freedom High School in 1939 and subsequently received her nursing certificate in Enid, Oklahoma as a Registered Nurse. While raising four children, she worked at various hospitals throughout her career, from Oklahoma to Oregon and California, and back to Oklahoma, including duties at the base Hospital on Clinton-Sherman Air Force Base in Washita County and at Western State Hospital in Ft. Supply, Oklahoma. Mrs. Tutt spent her latter years in Woodward, Oklahoma, where she resided until her passing in 2014. Mrs. Tutt was a skilled, competent and beloved nurse to all, with a wonderful Western sense of humor, caring for others in need, and always taking the time to mentor her staff and nursing assistants. She also proved herself to be an ethical and independent ranching businesswoman. She would be deeply gratified to know the fruits of her labors can now provide local students the opportunity to pursue a nursing career in Northwest Oklahoma. It is the Donor's hope that the recipients of this Scholarship will help carry on Roberta Tutt's love for nursing in Northwest Oklahoma.

Name \_\_\_\_\_

Present Address \_\_\_\_\_

Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

Mailing Address (if different than above) \_\_\_\_\_

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

Student ID Number or Social Security Number \_\_\_\_\_

High Schools attended (Ninth through Twelfth Grades)

Name of School	City	State	Period Attended
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Please indicate which nursing degree / diploma you are seeking:

\_\_\_\_\_LPN                      \_\_\_\_\_RN                      \_\_\_\_\_BSN

If you are not a current resident of Woodward, Harper, Dewey, Ellis, Major or Woods County, have you ever been? If yes, state the years you resided in such county and the reasons for no longer living in said county. \_\_\_\_\_

**Please provide the following:** On narrative questions, please be as complete and informative as possible. You may attach additional pages as needed. Your scholarship application is reviewed on content and totality of information provided.

1. An official transcript from your high school, community college, and/or undergraduate College/University, if applicable.
2. An essay, consisting of one-page minimum, two page maximum double spaced (12-pt font), describing why you have chosen to pursue a career in nursing. Please include in your essay your career goals and any specialty, facility or location desires upon receipt of your degree / license. Also, indicate why you think you should receive this scholarship.
3. Resume' setting forth honors, awards, community involvement, civic duties, secondary education, employment history, etc.
4. Official proof of applying to or acceptance/enrollment in an accredited College/University or vocational/technical school with a nursing curriculum and your expected completion date.
5. Two letters of reference. (Please note that these letters shall not be dated beyond six (6) months from the date of this application).

6. Please provide the circumstances that dictate your financial need for this scholarship assistance (please be specific). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. List all OTHER scholarship/loan programs you are applying for, or are receiving monies from:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Please indicate your expenses related to Tuition, Fees, Campus Room & Board and/or Books for which you are responsible for the 2019-20 academic year.

Tuition \$ \_\_\_\_\_  
Fees \$ \_\_\_\_\_ List: \_\_\_\_\_  
Campus Room &  
Board \$ \_\_\_\_\_  
Books \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_ List: \_\_\_\_\_

9. Are any members of your immediate family (parents, grandparents or siblings) involved in the nursing or medical profession? Yes No

Please explain: \_\_\_\_\_  
\_\_\_\_\_

**Applicant Certification:**

I hereby certify that all of the information provided in this application is complete and true to the best of my knowledge. I hereby grant permission to Health Services Foundation / Scholarship Committee to contact persons or institutions named in this application, if necessary, and to use my name and likeness in promotional materials in the event that I am selected to receive a scholarship award.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Eligible applicants must be Oklahoma residents and currently reside in or have resided in one of the five Northwest Oklahoma counties designated. Designated counties for this Scholarship, are the following: **Woodward, Harper, Dewey, Ellis, Major and Woods**. Scholarship funds can be applied to the costs of tuition, fees, campus room & board or books in attending an accredited post-secondary institution while pursuing a nursing degree / certification. The criteria on which the applicants will be reviewed shall be nursing career goals, financial need and activities / citizenship along with providing all information requested in its entirety. Interviews with applicants shall be at the discretion of the Scholarship Committee.

Once a scholarship recipient begins his or her studies within a specific nursing curriculum, the recipient may be eligible to receive subsequent Roberta M. Tutt Nursing Scholarship funds by maintaining good academic and disciplinary standing so long as the curriculum for that particular license or degree requires in excess of two (2) academic semesters. “Good academic standing” shall mean a 3.0 grade point average on a 4.0 scale. After the first scholarship year, the foregoing shall be evidenced by an academic transcript submitted by the recipient to the Foundation along with a written request for an additional award and listing your expenses for the upcoming year for tuition, fees, campus room & board, and/or books. A maximum of two (2) scholarship awards shall be granted to any one student within a particular degree or licensure program so long as the curriculum for that particular license or degree requires in excess of two (2) academic semesters in order to attain the degree or license. However, although a student may have been a prior recipient of a Scholarship Award, students are eligible to apply for additional Scholarship Awards in attaining a subsequent nursing degree and/or license. A single, “scholarship award” is defined as two (2) academic semesters.

No recipient shall be a member of the immediate family of the Scholarship Committee. Payment of this scholarship award will be made by Health Services Foundation directly to the post-secondary educational facility only after the scholarship winner has been admitted to that institution as a full time student and has provided evidence thereof.

Please mail application, essays, all reference materials  
and letters by August 23, 2019 to the following:

Health Services Foundation, Inc.  
Attn: Tutt Scholarship Committee  
P.O Box 1712  
Woodward, OK 73802

Questions can be directed to:  
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[sliles@hptc.edu](mailto:sliles@hptc.edu)  
580.571.6108