

Ohio NAPNAP Service Grant Application

Ohio NAPNAP Mission: It is our belief that all children have a right to quality health care and the opportunity to develop in a safe and secure environment. The Ohio Chapter of NAPNAP promotes and supports the role of Pediatric Advanced Practice nursing in its efforts to optimize quality of life for children and their families.

To this end Ohio NAPNAP is offering to its members service grants <u>ranging from \$100 to \$1000 dollars</u> to provide pediatric outreach and service. For instance if you are providing dental education at a school and get monies to provide dental care items to students Ohio NAPNAP wants to assist you. Or perhaps you are providing care at a local homeless shelter and there is a need for clothing or toys for children; let Ohio NAPNAP know.

- The applicant must be a member of Ohio NAPNAP and currently practicing as a PNP/FNP.
- The applicant awarded the service grant must be willing to write an article for the Ohio NAPNAP newsletter describing the service project.
- The applicant must complete the application describing the service project and how the monies will be used. Ohio NAPNAP will award up to \$1000 for a project.
- The application should be submitted to the Awards Committee for consideration by November 30th each year. The service grant will be awarded with the approval of the Ohio NAPNAP Board.

Address: City: State: Zip: Preferred Telephone: Home Work Cell Email: NAPNAP Member: yes no Total amount requested: Anticipated Start Date: Description of project/need:	Date of submission:	
City: State: Zip: Preferred Telephone: Home Work Cell Email: NAPNAP Member: yes no Total amount requested: Anticipated Start Date: Description of project/need:	Applicant name:	
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Email: NAPNAP Member:	City:	State: Zip:
Email: NAPNAP Member:	Preferred Telephone:	Home Work Cell
Total amount requested: Anticipated Start Date: Description of project/need:	Email:	
Anticipated Start Date: Description of project/need:	NAPNAP Member: yes no	
Description of project/need:	Total amount requested:	
	Anticipated Start Date:	
How will the requested funds be spent?	Description of project/need:	
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Must submit by November 30th each year to:

Info@ohionapnap.org
Attn: Awards Chair