



### Nebraska ENA National Conference Grant Application 2019

Thank you for your interest in receiving grant assistance to attend Emergency Nursing 2019 in Austin, Texas September 29-October 2, 2019. Nebraska ENA exists because of and for its members. The board is interested in selecting ENA members that are champions of emergency nursing or are exploring specific interests by attending the conference. We hope to financially support those that have always dreamed of attending national educational sessions but have previously been unable to do so. The grant funding provided is to be used by the applicant to offset airfare, transportation, lodging, or conference registration.

**Application deadline is June 6, 2019.** Please return electronically to NebraskaENAPresident@gmail.com or by mail to: NE ENA, PO Box 24941, Omaha, NE 68124-0941. NE ENA Board members will select and notify the chosen delegates by June 24, 2019.

Since this appointment is both an honor and a responsibility, a significant portion of the expenses needed to fund your travel, registration and lodging will be reimbursed by ENA. Full disclosure of all other reimbursement is required and awardees will be provided a separate verification statement that must be signed by their workplace manager. NE ENA will require receipts be sent to the treasurer to document how funds were used. "I will be receiving reimbursement for my travel/attendance at this conference from \_\_\_\_\_" (please specify source and amount of compensation).

Please complete the following demographics and information. This is not an exclusive list of your professional development and ENA involvement, but rather a starting point to give the board an idea of your passion and commitment to emergency nursing. Include additional information you think is applicable to your application. Please provide supporting documentation as appropriate (example: TNCC instructor card, ANA membership card, or date you were published in the newsletter).

#### Demographic Information

Name:

Address:

Email:

Phone Number:

Member Number:

**Community** Yes/No Description/Dates:

Volunteer Involvement  
Committee Chair  
Committee Member  
Recruitment Efforts  
Member Meeting Attendance  
Board Meeting Attendance  
Nursing-related Involvement

**Knowledge** Yes/No Description/Dates:

Collaboration (EMS, College Faculty, Other Professional Organization Membership)  
Current Board Certifications  
TNCC (Faculty, Director, Instructor, Provider)  
ENPC (Faculty, Director, Instructor, Provider)  
Other certified course related to ED Nursing  
Nebraska ENA Annual Conferences Attended  
National ENA Annual Conferences Attended  
Newsletter Contributor  
Other Published Works

**Quality and Safety** Yes/No Description/Dates:

Injury Prevention Involvement  
Lantern Award Work  
Evidence Based Practice Implementation

**Advocacy** Yes/No Description/Dates:

Previous Delegate/Alternate to General Assembly  
Legislation Support (letter, testify)  
NNA Day at the Legislature Attendance  
Day on the Hill Attendance

**Infrastructure** Yes/No Description/Dates:

Leadership Positions Held

## Personal Statement

Please describe your reason(s) for wanting to attend the Emergency Nursing 2019.

What does your ENA involvement look like in the future?