



# Sound Shore St. Patrick's Day Parade Scholarship Program 2026 Legacy of Service Nursing Scholarship

The Legacy of Service Nursing Scholarship was created to honor the dedication, courage and service of First Responders by supporting the educational goals of their children. This scholarship is awarded to a student who is the child of a First Responder (active or former), who plans to pursue a degree in nursing.

Applicants should demonstrate a strong commitment to the nursing profession, a desire to serve others, and an understanding of the values of compassion, resilience and service that are central to both first responders and healthcare professionals. This scholarship seeks to ease the financial burden of higher education while encouraging the next generation of caregivers to make a meaningful impact in their community. Through this award, we recognize the sacrifices made by First Responder families and invest in future nurses who are inspired to carry forward a legacy of service, caring and dedication to others.

Please complete all sections of the application. The deadline for submission is **April 15, 2026**.

## **SECTION 1 – PERSONAL INFORMATION**

Name:	Date of Birth:
Home address:	Home Phone:
Email address:	Cell Phone:

## **SECTION 2 - FIRST RESPONDER INFORMATION**

Parent    
  Legal guardian    
  Step-parent    
  Other (please specify) \_\_\_\_\_

Name:	<input type="checkbox"/> Active <input type="checkbox"/> Retired <input type="checkbox"/> Deceased
What position did/does the first responder hold? (check all that apply) <input type="checkbox"/> Firefighter <input type="checkbox"/> EMT <input type="checkbox"/> Paramedic <input type="checkbox"/> Police Officer <input type="checkbox"/> Emergency Dispatcher <input type="checkbox"/> Other (please specify) _____	
Agency / Department name: _____	
City, State of service: _____	
Years of service From: ____ To: ____ (or total years served) _____	
Employment status <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Volunteer	

Can you provide documentation verifying first responder service?  
 Yes     No

(Examples: department ID, letter from department, pension statement, death benefit letter, etc.)

**SECTION 3 –ACADEMIC INFORMATION**

Name of High School: \_\_\_\_\_  
\_\_\_\_\_

GPA: \_\_\_\_\_

High School Rank: \_\_\_\_\_ out of \_\_\_\_\_ (if your school does not do rankings, check here \_\_\_\_\_)

SAT/ACT Scores: \_\_\_\_\_ / \_\_\_\_\_  
(if you did not take SAT/ACT, please state reason: \_\_\_\_\_)

Expected Date of Graduation: \_\_\_\_\_

What Nursing Schools have you applied to? \_\_\_\_\_

What Nursing Schools have you been accepted to at this time? \_\_\_\_\_

Anticipated Nursing College or University \_\_\_\_\_

**SECTION 4 –ACTIVITIES, AWARDS, VOLUNTEER/COMMUNITY INVOLVEMENT**

**A. List and briefly describe your High School Extracurricular Activities (e.g. memberships in organizations, sports, clubs, etc.):**

Organization Involved	Position Held	Date(s) of Involvement

**B. List any Academic Honors/Awards you have received (e.g. scholarly activities, research, etc.)**

Award/Honor	Institution/Organization	Date

**C. List and briefly describe any Community or Volunteer Activities you have been involved with during the last four years:**

Organization	Activity	Date(s) of Involvement

**D. List any Work Experience or Home/Family Responsibilities that you feel have impacted your personal development during the last 4 years:**

**E. ESSAY:** As the child of a First Responder, you have grown up witnessing the values of service, sacrifice, and resilience. Nursing is a profession that reflects many of these same principles.

In an essay of **500-750** words, please describe how your parent or guardian's role as a First Responder has influenced your decision to pursue a career in nursing. Share a personal experience or moment that shaped your desire to support and care for others through healthcare and explain how you hope to make a positive impact on your community as a nurse.



**STATEMENT OF ACCURACY FOR APPLICANTS / STUDENTS**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Sound Shore St. Patrick’s Day Parade Scholarship Program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to Sound Shore St. Patrick’s Day Parade Scholarship policy, I must let the Scholarship Committee know in writing by June 1, 2026 of my intent to decline or accept the scholarship. Failure to do so by the above date will result in the forfeiture of the award and all benefits associated with the award.

I hereby understand that if chosen as a scholarship winner, according to Sound Shore St. Patrick’s Day Parade Scholarship Committee policy, it is my responsibility to let the committee know which educational institution to remit the funds to. The Committee will remit the award directly to the Financial Aid / Bursar’s Office of the intended educational institution by late July 2026.

I hereby understand I will not submit this application without all required attachments and supporting information, and that an Incomplete application or an application that does not meet eligibility criteria will not be considered for this scholarship.

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

**STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR OR PARENT**

I hereby affirm that this application meets the criteria set forth by this Scholarship Program and that I support this application to Sound Shore St. Patrick’s Day Parade Scholarship Committee.

Name of Guidance Counselor / Parent submitting the application:

\_\_\_\_\_

High School: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Guidance Counselor / Parent:

\_\_\_\_\_ Date: \_\_\_\_\_

## **SUBMITTING YOUR APPLICATION: APPLICATION CHECKLIST**

- Completed and sign printed application form.
- Any additional pages with application responses to Sections A-E.
- Two Letters of Recommendations, one from your Guidance Counselor, and a second one from a teacher, coach, employer, volunteer supervisor, or community leader.
- Copy of your high school transcript.

**APPLICATION DUE DATE: April 15, 2026**

**Mail Application & Required Attachments to:**

**Sound Shore St. Patrick's Day Parade**

**ATTN: Scholarship Application**

**426 Waverly Ave.**

**Box 17**

**Mamaroneck, New York 10543**