

## Lerner Holistic Integrative Health Nursing Fellowship External Candidates Application

Please read through this application in it's entirety. You cannot save this application. Once it is submitted it cannot be altered. You may wish to answer your narrative questions separately and then paste into the application once you are ready to submit. We review all applications and will be in touch with further instruction.

Attestation to Eligibility	
I am a licensed, registered nurse	
I have received a signed letter of supmentor	port from my manager and institutional
I am committed to participating in all implementation at my institution	learning experiences, including project
Lerner Holistic Integrative Head Candidates Application	alth Nursing Fellowship External
First Name	
Last Name	

Credentials	
Preferred Name (optional)	
Preferred Pronouns (optional)	
Work Email	
Alternate Email (optional)	
Phone	
Institution	
Department	
Job Title	
Hourly Salary (This information will be kept confidential)	
Level of Education	
Associates	
Bachelors	
☐ Masters ☐ Doctorate	
Other Non-Nurs	ing Degree
	5 0

List current certifications	
List current committee enrollments	
List fluent languages    English	
Certified in medical interpreto O Yes O No	ation
Please choose language(s) interpretation certification(s)  English Mandarin Hindi Spanish Arabic	•

	French		
	Bengali		
	Portuguese		
	Russian		
	Urdu		
	Other		
	Nurse Manager or Supervisor Name		
,	varie Mariager of Supervisor Marrie		
	Nurse Manager or Supervisor Title		
	Nurse Manager or Supervisor Email		
	Nurse Manager or Supervisor Phone		
	l and interpolated in the following		
	am interested in the following	opportunities:	
0	Health Equity Scholar. The candidate wh	no receives the design	ation of a Health
	Equity Scholar in the Lerner fellowship w	,	·
	equity in health outcomes; create a cult and lead in the development, implemen		_
	evidence-based solutions in health equ		
	Langone's <u>Institute for Excellence in Hea</u>		. ,
	receive full tutiiton waiver to the fellowsh on eligibility.	nip. Please click the lin	k for more details
$\bigcirc$	Match Program: We will match your em	inlover's contribution u	ın to \$5000 Your
	monthly tuition will reflect the remaining	· · ·	•
	pays \$5,000, we pay \$5,000, and you or	•	
0	Institutional Sponsorship: Your employe	r fully covers the cost	of your tuition.
0	Not applicable		

Do you meet at least one of the following criteria?

- Individuals from racial and ethnic groups that have been shown by the <u>National Science Foundation</u> to be underrepresented in health-related sciences and biomedical research on a national basis as follows: Blacks or African Americans, Hispanics or Latinos, American Indians or Alaska Natives, and Native Hawaiians and other Pacific Islanders.
- Individuals with disabilities, who are defined as those with a physical or mental impairment that substantially limits one or more major life activities, as described in the <u>Americans with Disabilities Act of 1990</u>.
- Individuals from disadvantaged backgrounds, defined as those who meet two or more criteria in the NIH's <u>Notice of</u> <u>Interest in Diversity (NOT-OD-20-031)</u>.

Interest in Diversity (NOT-OD-20-031).
O Yes O No
Please discuss any previous leadership roles you've held and provide examples of experience that demonstrate your commitment to promoting diversity, equity, and inclusion.

Please outline your plan for launching a health equity initiative that will employ a holistic strategy in a <u>vulnerable or</u>

underserved population (p.18-19) to tackle health disparities or obstacles affecting overall health and wellbeing.
<ul> <li>Please upload a letter of recommendation or character reference (PDF Only)</li> </ul>
Personal Statements (2000 characters max)  1. Why are you interested in applying for this fellowship?  Please describe your personal and/or professional interest in holistic nursing and/or integrative health
Please list professional accomplishments in your career, including awards, publications, presentations, promotions,
recognitions, certifications, etc

3. Please describe both your personal and professional goals for this fellowship	
	1
4. Your project idea should be tied to nursing practice as related to a Quality and Safety Education for Nurses (QSEN) domain. Please choose which category best reflects your project idea:	
Teamwork and Collaboration  Patient Centered Care  New Knowledge/EBP  Quality Improvement and Peer Review  Informatics  Safety  Unsure	
5. Please discuss your idea or proposal for your fellowship project. What population will your project focus on (staff, patients, caregivers)? What are your goals? Provide as much detail as possible.	

k	7. Please describe examples of prior lectors as ed on clinical experience that demonstrated and development while reflection of communication and interpersonal compatient family education, or council involutions.	onstrates personal on ng on expertise, petence, teambuild
K	3. This fellowship requires 172 dedicated period, averaging 19-20 hours a month	for this dedicated
	ime. Do you anticipate any barriers to t commitment? Yes	:his time

9. If you answered yes to question 8, please answer the following
<ul> <li>I am enrolling or currently enrolled in school</li> <li>I am enrolling or currently enrolled in another fellowship or program</li> <li>I am starting a new job or transferring units</li> <li>I have scheduled engagements or trips during the required in-person dates</li> <li>Other</li> <li>N/A</li> </ul>
Required Documents
• Resume (PDF Only)
Bio (PDF Only, Please do not include your name)
• Headshot (PNG or JPG Only)

• Letter of Recommendation from Institutional Mentor (PDF

	Only)
•	External Nurse Manager Letter of Support (PDF Only)

Clicking the next button will submit your application.