Needs Beyond Medicine
P.O. Box 712043
Salt Lake City, UT 84171
www.NeedsBeyondMedicine.org

The Karen Poulsen Brown Memorial Scholarship Fund

(Deadline: Application Entry MUST be postmarked on or by December 11, 2026)

Background
The Karen Poulsen Brown Memorial Scholarship, established in 2020 by the Needs Beyond Medicine Board of Directors, honors Karen's enduring commitment to family, community, and her 25 years of service in the nursing field. This $1,000 scholarship supports aspiring nursing students by helping cover essential education expenses.

Eligibility Criteria
Must currently reside in the State of Utah.
Must be attending an accredited College or University in Utah.
Must be enrolled in a nursing program or planning to enter a nursing program during the 2026–27 academic year.
Must be a U.S. Citizen or hold a valid F-1 student visa.

Application Requirements
Complete the scholarship application form.
Submit a two- to three-page essay (single-spaced, 12-point font, 1" margins) addressing the required topics.
Submit your application via post, email, or online by: **December 11, 2026.**
Submission Information
The Karen Poulsen Brown Scholarship Fund
P.O. Box 712043
Salt Lake City, UT 84171

Email: karenpbrownscholarship@needsbeyondmedicine.org
Subject Line: Scholarship Application Spring 2027

Winner Notification
The scholarship recipient will be notified around December 30, 2026, using the mailing and or email address provided.

Additional Information
Award decisions are based on eligibility and the quality of the essay submission.
The scholarship must be used for school-related expenses such as tuition, fees, or books. Proof of enrollment in an accredited Utah institution is required prior to fund disbursement.
Any misinformation, eligibility failure, or program withdrawal may result in forfeiture and return of funds.
For questions, email karenpbrownscholarship@needsbeyondmedicine.org.
The Fund encourages all qualified applicants. No discrimination is made on any basis.

Post-Award Requirements
Provide a one-page thank-you letter detailing how the scholarship assisted them.
Attend (optional) or participate in recognition at the Karen P. Brown Relief Golf Tournament in July 2027.

Application Form

Contact Information:

Name: _____

Current Address: _____ City: _____ State: ____ Zip: _____

Mobile Phone: _____

Email: _____

Date of Birth: _____

Are you a U.S. Citizen? (Circle one) Yes No

Academic Information:

Name of Current College/University: _____

School Address: _____

Major/Track: _____ Expected Graduation Date: (MM/YYYY) _____

Do you plan on pursuing a career in the nursing field? (Circle one) Yes No

In what nursing field/specialty would you like to work? _____

Estimated Use of Scholarship Funds:

$_____ Tuition $_____ Fees $_____ Books $_____ Other

If you plan to use funds for other education-related purposes, please describe:

_____
_____

I hereby affirm that all information provided is true. Any false statements will forfeit consideration for this scholarship. All information is strictly confidential.

Signature: _____ Date: _____

Print Name: _____

Essay Instructions

Write a two- to three-page essay (single-spaced, 12-point font, 1" margins) addressing the following topics:

- Your educational goals and future plans in the nursing field.
- What led you to pursue nursing.
- What motivates you to succeed in your future career.
- Why do you believe you are a strong candidate for this scholarship?
- A cohesive, well-written essay is a major component of the judging process. Grammar, clarity, and detail will be evaluated.