

NEW MEXICO BOARD OF NURSING  
APPLICATION FOR FUNDING  
FROM  
“NURSING EXCELLENCE FUND”

DATE OF APPLICATION:

ORGANIZATION NAME:

ATTACHMENTS:

1. Articles of Incorporation, Mission Statement, Organizational Budget/Financial Statement, References
2. Project Narrative
3. Project Plan: Goals, Objectives/Outcomes, Timeline
4. Evaluation Plan and Challenges
5. Project budget

PROJECT DIRECTOR:

1. Name:
2. Title:
3. Mailing Address:
4. Email address:
5. Phone:

We have attached all documents as required, and attest to the fact that these are true and reliable submissions regarding our intent to apply for funding from the Nursing Excellence Fund.

We agree to submit reports at least three (3) times per year at a regularly scheduled Board meeting, at dates to be determined by the Board. We also agree to submit any interim reports as requested by the Board.

Signature

Date: