



Nurse Faculty Loan Program (NFLP)

LETTER OF COMMITMENT

I _____, understand that upon receiving loan support under the Nurse Faculty Loan Program (NFLP) at **Kennesaw State University (KSU)** for the academic year **2023-2024**, I agree to complete the

- Master of Science (MSN)
- Post-Graduate Nurse Educator Certificate

program as a

- full-time or a
- part-time

student for the program of study periods required to graduate from the program.

I agree to:

- Enroll for at least two consecutive semesters each academic year of loan support;
- Sign the NFLP Promissory Note for each year of NFLP support; and
- Complete the required educator courses prior to graduating from the program.

Following graduation from the program, I intend to pursue and obtain a full-time nurse faculty position at an accredited school of nursing within 12 months. I agree to participate in the nurse faculty employment support activities provided by the Wellstar School of Nursing such as conference attendance for networking and those provided by the KSU Career Services Center including resume writing and interviewing skills workshops.

I have read and fully agree to this Letter of Commitment.

Signed _____ Date _____

Demographic Data for Annual NFLP Report

The Wellstar School of Nursing and Kennesaw State University are required to submit an annual report to the Health Resources & Services Administration (HRSA) about the Nurse Faculty Loan Program (NFLP) funds. The report includes questions about the demographics of our loan recipients. The questions below are for the purposes of submitting an accurate annual report.

Name: _____

Year of Birth: _____

Ethnicity:

- Hispanic/Latino Non-Hispanic/Non-Latino

Race:

- American Indian or Alaska Native – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American – A person having origins in any of the Black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Rural Residential Background: HRSA and the federal government define “rural” as less dense, sparse population, not built up, and/or at a distance. Are you from a rural residential background?

- Yes No

Disadvantaged Background: HRSA and the federal government define “disadvantaged background” as low income. Are you from a disadvantaged background?

- Yes No

Veteran Status:

- Active-Duty Military Reservist National Guard Veteran – Prior Service
 Veteran – Retired Not a Veteran

Current Zip Code: _____