



## MEMBER'S SCHOLARSHIP POINT RECORD

Name: \_\_\_\_\_ Membership #: \_\_\_\_\_

Hospital Affiliation: \_\_\_\_\_ Position: \_\_\_\_\_

	<u>Value</u>	<u>Sept</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>June</u>
Attend District Meeting	5/month										
Attend District Workshop	5 per										
Attend Workshop in Another District	5 per										
Attend OPANA Seminar	20 per										
Attend OPANA Workshop	15 per										
Attend National Conference	25 per										
Write Article for District Newsletter	5 per										
Write Article for OPANA Newsletter	10 per										
Current Member	15 per										
Chair District Committee	10/yr										
Hold OPANA Office	15/yr										
Serve on OPANA Board	10/yr										
Run for OPANA Office	10/yr										
CPAN/CAPA Certified	15 each year										
Recruit New Member	10 per										
Hours of OPANA Service	4/hour										
Total Points per Month											

**TOTAL Points:** \_\_\_\_\_

Previous 2 Years Points: \_\_\_\_\_

Signature \_\_\_\_\_

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