



Dr. Stephen J. Swartz Nursing Scholarship

The Dr. Stephen J. Swartz Nursing Scholarship was established in 2021 through the generosity of Joan Rechnitz to recognize Dr. Stephen J. Swartz for his exceptional contributions to patient care. For many years, Dr. Stephen J. Swartz has served on the medical staff at Riverview Medical Center and has built a reputation for his exceptional clinical care. Dr. Swartz has forged a special bond with the nursing staff on almost every unit of the hospital. This prestigious award signifies his strong commitment to nursing and to the promotion of excellence in patient care.

The Dr. Stephen J. Swartz Nursing Scholarship is presented to a team member or registered nurses who on a daily basis exhibit excellence in the delivery of patient care and are enrolled in Certificate, Bachelors, Masters, or Doctoral programs.

Award Criteria:

1. The nominee must be a registered nurse or team member enrolled in a Certificate program, Bachelors (pre licensure/RN to BSN), Masters in Nursing, Masters in Business Administration or Nursing Doctorate program.
2. The nominee must currently be employed by Hackensack Meridian *Health* (HMH) and be in good standing.
3. Preference will be given to candidates applying from RMC, then from Central Region hospitals, then HMH network wide.
4. Scholarship recipients may be awarded funds in multiple years.

DEADLINE FOR Application: July 17, 2026

Dr. Stephen J. Swartz Nursing Scholarship

2026 Nomination Form

Nominee's Name _____ PeopleSoft ID _____

Home Street Address _____

City _____ State _____ Zip Code _____

Phone: Home _____ Work _____ Cell _____

Email: _____ Campus _____

Position _____ Unit _____ Nurse Manager _____

National Certifications: _____ CAP Level: _____

Scholarships will be awarded in the following categories, please indicate the program you are enrolled in:

Certificate Program

School and type of Certificate _____

Bachelor's BSN ____ or ____ (pre licensure/RN to BSN)

School _____

Master's MSN ____ or ____ MBA

School and Specialty _____

Doctoral PhD ____ or ____ DNP

School _____

Attach the following:

1. Narrative Statement not to exceed 2 pages addressing how the nominee exhibits a commitment to excellence in patient care
2. Evidence of enrollment
3. Any additional documentation to support the application (optional) and may include letters of support, thank you letters from patients, award nominations, etc...

DEADLINE FOR SUBMISSION: July 17, 2026

Preferred Option: Scan completed application and supporting paperwork as one document (**not as a link or shortcut**) and send scanned document by email to: AnnMayCenter@HMHN.org

OR Mail to: Hackensack Meridian *Health* Ann May Center

100 Tormee Drive, 2nd Floor, Tinton Falls, NJ 07712

For more information contact the Ann May Center at AnnMayCenter@HMHN.org

KEEP A COPY OF THIS APPLICATION FOR YOU RECORDS