

BHW Management Information System Solution (BMISS)

National Health Service Corps (NHSC) Scholarship Program (SP) FY 2017 Online Application User Guide

January 2017



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Introduction: NHSC SP Online Application User Guide

Purpose: The NHSC SP Online Application user guide serves as the main tool for the Customer Care Center to answer applicant questions regarding issues applicants have when calling for resolution. In addition to this user guide, the Customer Care Center Analysts must be familiar with the NHSC SP Application Program & Guidance, as some of the questions will be program based and are not discussed in this user guide. The primary intent of this user guide is to focus on the functionality developed for the NHSC SP Online Application.

Roles: The application will be filled out by external users. The Customer Care Center Analysts need to understand the functionality to support external users should they encounter any problems with the application.

Precondition: Applicant has a question regarding the NHSC SP Online Application and contacts the Customer Care Center to resolve an issue.



Section 1: BHW Portal

The BHW Portal allows applicants to navigate to the NHSC SP application. Note: Applicant will skip this page if he/she links directly from the HRSA website.



Steps:

- 1. Applicant selects "Applying for the NHSC Scholarship Program."
- 2. System displays log in page.
- 3. Applicant can log in and begin his/her application.



Section 2: Create Account

The first action an applicant takes for the NHSC SP Online Application is to create an account.

Steps:

- 1. Applicant navigates to the Online Application via the weblink: https://programportal.hrsa.gov/extranet/application/n hscsp
- 2. Applicant selects the "Create an Account" link in the bottom left hand section of the page.

- If an applicant has an existing account for another program, he/she will be able to log in with those credentials.
- An applicant may not create an application after the application deadline April 28, 2016, 7:30 PM EST.
- The applicant will be prompted to fill in a series of fields in order to create an account. Once the applicant selects "Create," the system will send an activation email to the email address used to create the account. The instructions for the applicant are detailed in the activation email.

	NHSC SCHOLARSHIP PROGRAM AP	PLICATION
	Login Please log in using the	ne fields below:
	Your Password *	forgot your password?
Create an	Account	Questions?
Note: If you have pr BHW program in the existing account info	eviously registered to apply for NHSC SP or current or past application cycles, please u rmation to log in.	 r any other ise your Refer to the Portal FAQ Contact the BHW Customer Care Center at 1-800-221-9393 Use TTY for hearing impaired: 1-877-897-9910
OMB Public Burde An agency may not respond to, a collect control number. The through this applica 06/30/2017. Public in publication of 5 hours?	n Statement conduct or sponsor, and a person is not req ion of information unless it displays a currer current OMB control number for information ion process is 0915-0146 and the expiration eporting burden for this collection is estimation	Monday-Friday (except Federal holidays), 8:00 am to 8:00 pm ET or Contact Us. n collected n date is ted to
average 4.5 nour(s) instructions, searchi data needed, and co Send comments reg	per response, including the time for reviewing ng existing data sources, gathering and mai completing and reviewing the collection of info	ing intaining the iormation.





NHSC SP Online Application User Guide

<u>Steps</u>:

1. Applicant answers each of the required fields.

CREATE

- 2. Applicant selects to register an account with the NHSC SP.
 - Once an applicant has created an account, he/she must use the same log in information if he/she applies to any other scholarship or loan repayment programs.
- 3. The system will alert the user at the top of his/her screen that his/her account is created. The system will also send an activation email to the applicant's email address.
- 4. The email will be from: noreply@hrsa.gov with the subject "Activate your HRSA account." The applicant will open the email and click on the activation link in the body of the email.
- 5. The system will re-direct the applicant to the Home page, notifying him/her that his/her account is activated.

Business Rules:

- The email address provided by the applicant will serve as his/her username.
- The system will not allow the applicant to use an email that is already linked to an existing participant account.
- The following information will be auto-populated on the General Information section of the application:
 - First Name
 - Last Name
 - Middle Initial (if entered by the applicant)
 - Title (if entered by the applicant)
 - Suffix (if entered by the applicant)
- Applicants can hover over the tool tip next to the Password field for details on password criteria.
- An applicant must activate his/her account before he/she can log in.

AL HEALTH			-
VICE	NHSC SCHOLARSHIP PROGRAM APPLICATION		Login
PS 🏹			
	Create My Account		
	Please read the 2017 Application and Program Gui National Health Service Corps Scholarship Program.	idance for eligibility criteria prior to creating an account to apply t	or the
	Once you complete and submit the following information to you. You will need to verify your email address within	on, an email message with a link to verify your email address will t in two (2) days to be able to login to your account.	be sent
	First Name *		
	Last Name *		
	Middle Initial		
	Title	Select -	
	Suffix	Select •	
	Email *		
	Confirm Email *		
	Create Password * 🕖		
	Confirm Password *		
	Security Question *	Select	
	Security Answer *		
		CRE	ATE

SER

COR

Section 3: Logging In

After activating an account, the applicant will be able to log in. The applicant will enter his/her email address and password used when creating his/her account. If the applicant forgets his/her password, he/she can reset his/her password by selecting the *"Forgot your password?"* link.

Steps:

- 1. Applicant enters his/her email address and password.
- 2. Applicant selects **LOGIN** (Login) and the system brings him/her to the Not Started Home page.

- The applicant will be warned after his/her second failed log in attempt.
- The applicant's account will be locked after the third failed log in attempt.
 - The applicant can select "Forgot your password?" link to reset his/her account, or;
 - Contact the Customer Care Center to have his/her account unlocked.
- System will not allow user to create account if Applicant's Primary Email is already associated with a BMI SS participant account.

CORPS	NHSC SCHOLARSHIP PROGRAM APPLICATION	
	We have successfully create your account.	ed your account. Please check your email for instructions on how to enable
	Login	
	Please log in using the fields belo	W:
	Your Email *	
	Your Password *	
	forgot yo	LOG IN
Trooto an Ac	count	Quastions?
Create an Ac	count	Questions?
Create an Ac	COUNT ate an account for the NHSC SP	Questions?
Create an Ac Not a registered user? Crea Note: If you have previously BHW program in the current existing account information	COUNT ate an account for the NHSC SP > y registered to apply for NHSC SP or any other t or past application cycles, please use your to log in.	Questions? For more information or questions please: • Refer to the Portal FAQ • Contact the BHW Customer Care Center at 1-800-221-9393 • Use TTY for hearing impaired: 1-877-897-9910
Create an Ac Not a registered user? Crea Note: If you have previously BHW program in the current existing account information OMB Public Burden State An agency may not conduct respond to, a collection of in control number. The current	COUNT ate an account for the NHSC SP > y registered to apply for NHSC SP or any other t or past application cycles, please use your t to log in. ment or sponsor, and a person is not required to iformation unless it displays a current OMB (OMB control number for information collected)	Questions? For more information or questions please: • Refer to the Portal FAQ • Contact the BHW Customer Care Center at 1-800-221-9393 • Use TTY for hearing impaired: 1-877-897-9910 Monday-Friday (except Federal holidays), 8:00 am to 8:00 pm ET or Contact Us.
Create an Ac Not a registered user? Crea Note: If you have previously BHW program in the current existing account information OMB Public Burden State An agency may not conduct respond to, a collection of in control number. The current through this application proc 06/30/2017. Public reporting	COUIDE ate an account for the NHSC SP y registered to apply for NHSC SP or any other t or past application cycles, please use your t to log in. ement or sponsor, and a person is not required to nformation unless it displays a current OMB t OMB control number for information collected cess is 0915-0146 and the expiration date is a burden for this collection is estimated to	Questions? For more information or questions please: • Refer to the Portal FAQ • Contact the BHW Customer Care Center at 1-800-221-9393 • Use TTY for hearing impaired: 1-877-897-9910 Monday-Friday (except Federal holidays), 8:00 am to 8:00 pm ET or Contact Us.



Section 4: Forgot Your Password

If the applicant forgets his/her password, he/she will have to select the forgot your password? (Forgot Password) link and follow the steps below in order to reset it:

Forgot Password?	
Step 1: Enter email address below Email Address *	
1.	NEXT

Steps:

- 1. Applicant selects forgot your password? (forgot your password).
- 2. Applicant enters his/her email address and selects **NEXT** (Next) (Figure 1).
- 3. The Applicant answers his/her security question they selected when they created his/her account, and selects **SUBMIT** (Submit) (Figure 2).
- 4. System displays confirmation and sends email to applicant (Figure 3).
- 5. Applicant selects Reset Password Link from email.
- 6. Applicant enters new password and selects UPDATE PASSWORD (Update Password). (Figure 4).

Forgot Password? * required field	
Step 2: Answer your security question below to h your password reset.	ave
What is your favorite pet's name?	
Answer *	
SUBM	ΙТ
۷.	

Forgot Password?

Step 3: Check your email.

You should receive an email containing a link to reset your password. If you do not access this link and reset your password within 2 days the link will expire and you will have to request a new one.

3



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Change Passv * required field	vord	
New password * () Confirm new password *		
4		UPDATE PASSWORD
4		

Notes:

• Passwords must have a minimum length of eight characters; shall not contain slang, jargon, or personal information; shall not contain all or part of your username; and must contain: at least one English upper-case character (A-Z), at least one English lower-case character (a-z), at least one numerical digit (0-9), and at least one special character (e.g. @, !, \$, %). A character may not be repeated more than once in succession.



Section 5: Home Page

The Not Started Home page is the first page the applicant will see on his/her initial login. Once the applicant has started his/her application, his/her status will change to "In Progress" and he/she will be directed to the NHSC LRP "In Progress" Home Page when logging in.

Steps:

- 1. Applicant reviews information displayed on the Home Page.
- 2. Applicant

START MY APPLICATION (Start My Application).



Notes:

 Applicants are strongly encouraged to read the 2016 Application and Program Guidance document prior to starting his/her application.

Bureau of Health Workforce (BHW) NHSC SP Online Application User Guide

Current Tuition and Fees Schedule

The online application consists of 9 sections listed below. The first two sections, "Assurances" and "Eligibility", determine your eligibility for an NHSC SP award based on your responses to the questions in these sections. You will not be able to continue with the application if you are determined to be ineligible for the program at this stage.

If you are deemed eligible to participate in the program, you will be able to save your information and move to the General Information section.

Please note: You will not be able to access the next section of the application until you have complete all the required fields in the previous section.

1. Assurances

2. Eligibility

3. General Information

4. Background Information

5. Degree Information

6. Letters of Recommendation

7. Supporting Documents

8. Self-Certification

9. Review & Submit

Prior to submitting your application, you will have the opportunity to review it. Once your application has been submitted you will have the ability to edit it until the deadline. Your final application will be available to review, download and print.

Please note: If you edit your application, you must remember to resubmit it.

To ensure that your application is complete, please refer to the 2017 NHSC SP Application and Program Guidance

Please select "Start My Application" to begin your online application.

The final submission date is April 27, 2017 at 7:30 PM EDT. Remember to log into the NHSC SP online application to check the status of your application!

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current OMB control number. The current OMB control number for information collected through this application process is 0915-0146 and the expiration date is 06/30/2017. Public reporting burden for this collection is estimated to average 4.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Office, 5600 Fishers Lane, Room 10-33, Rockville, Maryland 20857.

START MY APPLICATION



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If the applicant returns to his/her previously saved application, once he/she logs in, the applicant is directed to the Home page and the application status will display "In Progress." The applicant will be able to continue with his/her last saved page or jump to any completed section by selecting the blue link.

Steps:

- 1. Applicant reviews information on status page.
- Applicant navigates to a specific section by selecting the page name hyperlinked in the table, or;
- 3. Applicant chooses to continue his/her application from the last saved page by selecting

CONTINUE (Continue).

- System shall only link to application pages that are in a "Complete" or "In Progress" status. The applicant will not be able to jump a page that is "Not Started."
- If the applicant selects "Continue," the system shall direct him/her to the last "In Progress" page.





Section 6: Assurances

The Assurances section is the first section of the NHSC SP application. This section informs the applicant of the terms, conditions and obligations associated with the acceptance of a NHSC scholarship award. An applicant must accept all assurances to proceed to the next section.





Section 7: Eligibility

The Eligibility page is used to ensure the applicant meets the qualification requirements to apply for an NHSC SP application. If the applicant is deemed eligible, he/she will be able to continue with the application. If an individual does not pass the eligibility portion of the online application, he/she will not be able to continue with the application.

. Are you a US c	itizen or a US national? *
Yes () No	
. Have you ever cademic or disci	been dismissed, placed on probation, suspended, or voluntarily withdrawn from a health profession school for plinary reasons? *
)Yes ⊚No	
. Do you have a	judgment lien against your property from a Federal debt? * 🕡
)Yes ⊚No	
. Have you defai s uncollectible?	ilted on any Federal or non-Federal payment obligations or had any Federal or non-Federal debt written off 1
)Yes ⊚No	
. Do you have a	existing service obligation? * 🕖
)Yes ⊖No	
Will it be comple	etely satisfied on or before application submission? *
⊖Yes ⊖No	
Are vou a unifo	med service member or member of reserve corps? *

Steps:

- 1. Applicant answers all required questions.
- 2. Applicant selects SAVE & CONTINUE (Save & Continue) once they have answered all the required questions.
- 3. Applicant will be directed to General Information page, if they are eligible.
- 4. Applicant will be directed to the In Progress Ineligible landing page, if found ineligible.

Business Rules:

- If applicant answers "Yes" to Question (5), the applicant will be required to answer two subquestions.
- If applicant answers "Yes" to Question (5), the applicant will be required to upload a proof of existing service document on the supporting document page.
- If applicant answers "Yes" to Question (8), the applicant will be required to answer one additional subquestion.
- If any answers deem the applicant ineligible, the applicant will be directed to the "Ineligible Landing Page" upon clicking Save & Continue (see screen shot on next page)
- If an applicant is directed to the "Ineligible Landing Page",

he/she may navigate to the Eligibility section to change his/her answers if the applicant feels he/she answered in error

• Please note: The applicant will not be made aware of which combination of answers made he/she ineligible.



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6. Have you defaulted on a service obligation to a federal, state, local government, or other entity or had a federal service/payment obligation waived? * 🕡
⊘ Yes
7. Will you be enrolled as a full-time student during the 2017-2018 school year and will your class attendance begin on or before September 30, 2017? *
● Yes ◎ No
8. Are you enrolled in a joint degree program? *
í Yes ⊚No
Is the second degree a Master of Public Health? *
SAVE & CONTINUE





Section 7: General Information

The General Information page consists of questions regarding the applicant's contact and background information. Some information (such as First and Last Name, Middle Initial, etc.) is pre-populated from the answers the applicant entered when creating his/her account.

General Information	<u>Steps</u> :
FULL NAME First Name* Last Name* Last Name* Test Middle Initial Title Select • Suffix Select • Suffix Select • Address Line 1* Address Line 2 Country* Select • State/Province/Region/Territory* Select • City* City* Suffix Select • My preferred mailing address is the same as my home address Address Line 2 Country* Select • State/Province/Region/Territory Select • State/Province/Region/Territory Select • City* City* Select • State/Province/Region/Territory Select • State/Province/Region/Territory Select • State/Province/Region/Territory Select • City* City* Select • State/Province/Region/Territory Select • State/Province/Region/Territory Select • State/Province/Region/Territory Select • State/Province/Region/Territory	 Applicant answers required fields. Required fields denoted with an asterisk (*). Applicant selects SAVE & CONTINUE (Save & Continue) once he/she has answered all required fields. Applicant will be directed to the Background Information page upon selecting Save & Continue if all required fields are complete. Business Rules: The following fields are populated from the create account process First Name Last Name Middle Initial Title Suffix If the applicant selects a country other than the United States , the State/Province/Region will update to a text field If the applicant enters an SSN that is tied to another participant portal account, an error message will display and the applicant will not be permitted to continue Error message will request for the applicant to login with existing participant portal account



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PHONE	
My preferred phone is an international num	ber
Preferred Phone *	
🔲 My alternate phone is an international numl	ber
Alternate Phone	
EMAIL	
Preferred * 🕖	katnrynmiatimer+o@gmail.c
Alternate 🕧	
SOCIAL SECURITY NUMBER	
SSN * 🕖	
0	
Confirm SSN "	
Has your school over certified you as having a d	icadvantaged background? (If yes, you will be required to unly
a supporting document). *	isauvantageu background (n yes, you win be required to upr
🔍 Yes 🔍 No	
EXCEPTIONAL FINANCIAL NEED 🔮	
Have you ever received Federal support under t Financial Need (EFN)? (If yes, you will be requi	he Scholarship Program for First-Year students of Exceptional red to upload a supporting document) *
🔘 Yes 🔘 No	
HOW DID YOU HEAR ABOUT NHSC SC	HOLARSHIP PROGRAM
How did you hear about the Select	• • • • • • • • • • • • • • • • • • • •
NHSC SP?*	

- An applicant will receive an error message and will not be . allowed to continue if a current participant is applying and the SSN does not match the SSN in the participant record
 - Error message will request for the applicant to edit the 0 SSN or contact Customer Care Center to update participant record.
- An applicant can edit SSN and re-enter numbers ٠
- System shall allow applicant to continue if SSN exists within ٠ another application for a different program in the current cycle and applicant is using the existing account information
- Note: •
 - o If applicant modifies the SSN number in one application, it will automatically update the SSN for all other applications in the same cycle
 - To expedite issue resolution, the Customer Care Center should provide the error code listed in the error message when entering a log.



SAVE & CONTINUE

upload

State/Province/Region *

Year received *

Highest level of education received *

Section 8: Background Information

The Background Information section captures specific information about the applicant, including education information, demographic information and emergency contact information.

D 1 17	<u>(</u>			
Background Ir * required field	iformation			
PLACE OF BIRTH				
Country *		United States	~	
State/Province/Region *		Pennsylvania 🔽		
City *		Pittsburg		
Date of Birth *		01/05/1983		
DEMOGRAPHICS				
Award selection will not be	e determined by this sectio	n		
Gender	Male			
	() Female			
Ethnicity	O Hispanic or Latino			
	Not Hispanic or Latin	D		
Race	American Indian or A	laskan Native		
You may multi-select	You may multi-select			
ainerent race values.	Black or African-Ame	rican		
Native Hawaiian or Other Pacific Islander				
	☑ White			
BACKGROUND ED	UCATION INFORM	IATION		
Name of Institution for Hig Received *	hest Education	Newy York University		
City *		New York		
Country *		United States	\checkmark	

New York

Bachelor's

~

~

<u>Steps</u>:

- 1. Applicant completes all required fields.
- 2. Applicant selects (Save & Continue) once he/she has completed all the required fields.
- 3. Applicant is directed to the Degree Information page.

- Required fields are denoted with an asterisk.
- The applicant is not required to answer demographic information questions.
- The applicant's birth date must be prior to application cycle start date.



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First Name *	Matthew	
.ast Name *	Marks	
Middle Initial	F	
Line 1 *	873 Market Street	
Line 2	Apartment 3	
Country *	United States	
State/Province/Region *	North Carolina	
City *	Wilmington	
Zip/Postal Code *	24377	
Contact's preferred phone	is an international number	
Preferred Phone *	7984531256	
Contact's alternate phone	is an international number	
Alternate Phone		
		SAVE & CONTINUE



Section 9: Degree Information

The Degree Information page collects information about the school for which the applicant is requesting scholarship funding, as well as additional information regarding the applicant's education.

I	Degree Information required field	<u>-316</u> 1.	<u>∍ps</u> . Ap ∙
	Your answers in the section should ONLY pertain to the degree or certificate program for which you are seeking an NHSC Scholarship Program award.	2.	Ap Let
	Select the state and name of the school you are attending for which you are requesting scholarship. Additionally, please answer all other required fields regarding your education.	<u>Bu</u>	sine
	PROFESSIONAL HEALTH DISCIPLINE	•	The
	Discipline * Nurse Practitioner	•	If th
	Specialty Adult		ent
	DEGREE	•	The
	What degree or certification will you receive upon completion of your program? * Master's		on
	SCHOOL		
	If the name of your school is not listed in the drop down menu, please select "Other", complete the texts fields and save the page. The NHSC Scholarship Program staff will verify your school's accreditation and follow up with you accordingly. Please note: Changing your school during the review process will put your application at risk of not being funded.		
	Accreditation Agencies	•	lf a app
	 Allopathic/Osteopathic Schools (MD or DO) - Liaison Committee on Medical Education (sponsored by the American Medical Association and the Association of American Medical Colleges) OR the American Osteopathic Association, Commission on Osteopathic College Accreditation 	•	sta
	Dental Schools (DDS or DMD) - American Dental Association, Commission on Dental Accreditation		
	Nurse Practitioner School or Program (Master's degree or Post Master's Certificate) - Accreditation Commission for Education in Nursing or the Commission on Collegiate Nursing Education		
	Nurse Midwife School or Program (Master's degree or Post Master's Certificate) - American College of Nurse-Midwives,		
	Physician Assistant School or Program (Master's degree or Post Master's Certificate) - Accrediation Review Commission on Education for the Physician Assistant		
	State * Georgia	•	lf a ine
	School Name * Emory University - Nell Hodgson Woodruff School of Nursing		

Steps:

- 1. Applicant answers required fields.
 - Required fields denoted with an asterisk (*).
- 2. Applicant will click SAVE & CONTINUE and be directed to the Letters of Recommendation section.

<u>Business Rules</u>:

- The applicant can enter up to (3) decimal places for his/her GPA.
- If the applicant checks "Non-Standard GPA" the applicant can enter an alphanumeric GPA.
- The Search School button will allow a school search based on name, and state.
 - If an applicant changes his/her discipline, he/she will have to re-select his/her school information
 - If an applicant's school or degree is not listed in the search results, the applicant can submit a "New School or Degree" request
- If an applicant's school is not listed in the search results, the applicant can select "Other."
- If an applicant submits a "New School or Degree" request his/her status will be updated to "In Progress-School Not Found"
 - The applicant may continue with the application as program reviews his/her reques
 - An applicant may not submit his/her application if the Degree Information section is in the "In Progress-School not Found" status
 - The applicant will be notified when the review of the "New School or Degree" request is complete
 - If the request is approved, the application is automatically updated with the new school and/or degree information
- If an applicant's school is not valid, the applicant will be made ineligible and will be unable to continue with the application.



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As of 09/30/2015, in what year of your health professions program will you be enrolled? * 🕖	First
Do you pay resident or non-resident tuition? *	Resident (In State) ON-Resident (Out of State)
What is the date you started or will start the program? *	09/01/2015
What is your program end date? *	05/05/2017
What is your expected graduation date? *	05/15/2017
What is the length of your program? *	2 years
Time left until completion of program *	2 years
Start and End Dates	
Please enter the start date, end date, and if you are completed. The system will populate a start date, e have left in your application. (For example, if your 7 end dates, and checkboxes for each year).	e requesting funding for each year you have left until your program is end date, and checkbox to indicate funding requested for each year you Fime Left Until Completion of Program = 3, there will be 3 start dates,
Please note: NHSC SP will only fund a maximum o consecutive school years, except for the final year Dates for each year of your program must be betwee	of 4 years of service. The years you are requesting funding must be full which can be less than a full school year. Additionally, Start and End een July 1st and June 30th of that school year.
Year 1 Start Date * 09/01/2015	Year 1 End Date * 05/05/2016
☑ I am requesting funding for year 1	
Year 2 Start Date * 09/01/2016 ☑ I am requesting funding for year 2	Year 2 End Date * 05/05/2017

- School start dates must be between July 1st and September 30th for each academic year.
- School end dates must be on or before June 30th for each for each academic year.
- An applicant must request funding for the first year he/she is applying.
- Applicants must request funding for consecutive years.



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Years of Scholarship Support	Years of Service Obligation
Up to 1 Full-Time School Years (2015-2016)	2 Years Full-Time
Up to 2 Full-Time School Years (2015-2017)	2 Years Full-Time
Up to 3 Full-Time School Years (2015-2018)	3 Years Full-Time
Up to 4 Full-Time School Years (2015-2019)	4 Years Full-Time
GPA	
Please enter the cumulative GPA for your most recently or alternate GPA options, select "non-standard" GPA below	completed undergraduate or graduate program. (For Pass/Fail or other)
Please enter the cumulative GPA for your most recently or alternate GPA options, select "non-standard" GPA below Please upload the most recent undergraduate or graduate on the Supporting Document page.	completed undergraduate or graduate program. (For Pass/Fail or other) te degree transcript (i.e. the transcript which reflects the entered GPA)
Please enter the cumulative GPA for your most recently of alternate GPA options, select "non-standard" GPA below Please upload the most recent undergraduate or graduat on the Supporting Document page.	completed undergraduate or graduate program. (For Pass/Fail or other) te degree transcript (i.e. the transcript which reflects the entered GPA)
Please enter the cumulative GPA for your most recently of alternate GPA options, select "non-standard" GPA below Please upload the most recent undergraduate or graduat on the Supporting Document page.	completed undergraduate or graduate program. (For Pass/Fail or other) te degree transcript (i.e. the transcript which reflects the entered GPA)



Section 10: Letters of Recommendation

An applicant must submit two letters of recommendation with his/her NHSC SP application. The first letter should be from a faculty advisor, department chair or faculty member who can speak to the applicant's qualifications. The second letter should be from an individual who is familiar with the applicant's professional,

Letters of Recommendation

All letter of recommendations must be completed online. It is your responsibility to ensure that both recommendations are submitted by the application deadline. You will not be able to submit your NHSC SP application until both recommendations are completed. You will be able to continue to the next page of the application after both requests are sent to your recommenders. Additionally, you may cancel and re-submit a request as long as the letter has not already been completed by the recommender. You will not be able to see the completed letter of recommendation. The recommender will not be able to upload letters of recommendation after the application deadline (September 29, 2016 at 7:30 PM EDT) or once you submit your application, whichever comes first.

ACADEMIC LETTER OF RECOMMENDATION

If you are currently enrolled in the health professions training program, the letter should be from your Department Chair, Faculty Advisor or a Faculty Member of your academic program who know you well and can attest to your qualifications. If you have not begun the training associated with this scholarship as indicated in this online application, the letter should be from the Department Chair, Faculty Advisor, or a Faculty Member of your most recent academic program. The letter of recommendation must be on an official letterhead or signed and dated by the recommender.

Status: Not Started	
Recommender Title *	Select ▼
First Name *	
Last Name *	
Email *	
Request Recommendation	

community, and/or civic activities, particularly those related to underserved communities.

<u>Steps</u>:

- 1. Applicant will enter the title, first name, last name and email address for each recommender.
- 2. The applicant will click Request Recommendation for each recommender.
- 3. Applicant will click **SAVE & CONTINUE** and proceed to the supporting documents section.

- Once an applicant requests a recommendation, the recommender will receive an email containing a link to upload the recommendation document.
- When the recommender clicks the link in the email, he/she will be directed to the letter of recommendation upload page (see screenshot on next page).
- An applicant has the ability to cancel and resend a requested recommendation.
- An applicant must have two completed recommendations in order to submit his/her application.
- An applicant will receive ann error message if he/she attempts to initiate a Letter of Recommendation request using his/her primary or alternate email address.
- An applicant will receive an error message if he/she enters the same email address for both the Academic and Non-Academic recommender.



NHSC SP Online Application User Guide

Letter of Recommendation Request Email:

Letter of Recommendation Request Dinbox	of Recommendation Request Inbox x BMISS x Inbox x BMISS x 1:42 PM (0 minutes ago) ☆ 1:42 PM (0 minutes ago) ☆ 1:40 PM (0 minutes ago) ☆ 1:40 PM (0 minutes ago) ☆ 1:40 PM (0 minutes ag
bmiss@voosh.de to me ⊽	1:42 PM (0 minutes ago) 🔬 🔹
Dear Mr. Joe Test,	
Ashley Test has requested that you complete a letter of rea Services Administration (HRSA) National Health Service C	commendation for his/her scholarship application for the Health Resources and corps Scholarship Program (NHSC).
In order to complete this recommendation, please select th https://testbcrs.hrsa.gov:443/extranet/application/nhscsp/u	e following link: pload-letter.seam?requestId=2719421424889670836
Dear Mr. Joe Test, Ashley Test has requested that you complete a letter of recommendation for his/her scholarship application for the Health Res Services Administration (HRSA) National Health Service Corps Scholarship Program (NHSC). In order to complete this recommendation, please select the following link: https://testbcrs.hrsa.gov:443/extranet/application/nhscsp/upload-letter.seam?requestId=2719421424889670836 Once you have navigated to the letter of recommendation page, please confirm that all of the information is accurate for both y applicant. You will have the ability to upload the letter of recommendation. Please note that the applicant will be unable to subr finalized application until your recommendation has been submitted.	page, please confirm that all of the information is accurate for both you and the commendation. Please note that the applicant will be unable to submit their submitted.
If you have any questions, please contact the Customer Ca (except federal holidays) from 8:00 a.m. to 8:00 p.m. ET.	are Center at <u>1-800-221-9393</u> (TTY: <u>1-877-897-9910</u>) Monday through Friday
Sincerely, National Health Service Corps Scholarship Program	



Instructions for Uploading a Letter of Recommendation Page:

Instructions for Uploading a Letter of Recommendation

Please upload your letter of recommendation as soon as possible. The applicant cannot submit his/her application until the letters of recommendation are uploaded. You will not be able to upload your letter of recommendation after the application deadline (September 29, 2016 at 7:30 PM EDT) has passed.

Please review your contact information and update it if necessary. Once the application closes, this page will expire. If you have any questions, please contact the Customer Care Center at 1-800-221-9393. The recommendation letter MUST include the following:

- Student's first initial, last name, and Application ID;
- Student's discipline;
- Your Name (Printed);
- Your Title or Organization;
- Your Address (unless already on letterhead);
- Signature;
- A description of your relationship to the student and the length of time you have known the student;
- A discussion of the following points:
 - The student's education/work achievements.
 - · The student's ability to work and communicate constructively with other people, and
 - · Your assessment of the student's particular characteristics, interest and motivation to serve populations in areas of greatest need in health professional shortage areas. This assessment should include your knowledge of the student's work experiences, pertinent course work, special projects, research, or other activities that demonstrate an interest in and commitment to serving underserved populations

UPLOADED LETTER

[Untitled] (2).pdf

APPLICANT INFORMATION Applicant Name Application ID Program 308566 Kate Test NHSC Scholarship Program Applicant Email kathrynmlatimer+30@gmail.com

YOUR INFORMATION

Recommender Title *

Mr.	•	
-----	---	--

First Name *

smith

Documents cannot be larger than 5MB. TIFFs, JPEG, PNG files are not acceptable forms. Taking a picture of the

Last Name *

I	PROPERTY OF HRSA BHW	
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Section 11: Supporting Documents

The Supporting Documents page allows the applicant to upload his/her required application documents. Please note that some of the documents displayed on the Supporting Documents page appear dynamically based on answers provided on the online application.

Supporting Documents

Select the document type you would like to upload, select browse and then select "Upload". All documents are required in order to select "Continue." When you have uploaded the documents, you will be able to view the link of the downloaded document.

Please upload PDF documents when possible to enhance processing time. Documents cannot be larger than 5MB in size. TIFF, JPEG, PNG, and HTML are NOT acceptable file types. Multiple documents uploaded in the incorrect location may cause delays in processing your application.

Please Note: All information provided in the supporting documents and the online application must be consistent. Applications with discrepancies <u>will not</u> be considered for an award.

ESSAY QUESTIONS

- How will you contribute to the mission of the National Health Service Corps in providing care to underserved communities?
- 2. What experiences have you had or activities have you participated in that have prepared you to work with underserved populations?
- 3. Please discuss your commitment to pursue a career in primary health care.

Essays should be limited to 2,500 characters or less in Times New Roman 12 font.

TEMPLATE DOCUMENTS

Please use the following document templates for the corresponding supporting documents. You will need to print and complete the forms, obtain the required signatures, and scan them in order to upload.

- Authorization to Release Information
- Acceptance Report/Verification of Good Standing
- Verification of Exceptional Financial Need (if applicable)
- Verification of Disadvantaged Background (if applicable)

Steps:

- 1. Applicant selects the document he/she would like to upload.
- 2. Applicant selects **Browse** (Browse) to find the document he/she will upload.
- 3. Applicant selects **Upload** (Upload) when appropriate document is selected.
- 4. Applicant repeats these steps for all of the required documents.
- 5. Applicant clicks **SAVE & CONTINUE** (Save and Continue).
- 6. Applicant is directed to the Self Certification Page.

- Applicants are required to upload all documents displayed on the screen shot.
- If applicant responded "yes" to having an existing service obligation, he/she will be prompted to upload the "Existing Service Obligation/Uniformed Service Member" document.
- Template Documents are located above the Upload Documents table.



NHSC SP Online Application User Guide

UPL	OAD DOCUMENTS			
	Document Title	Document File	Status	Delete
\odot	Acceptance Report/Verification of Good Standing		Not Received	
0	Authorization to Release Information		Not Received	
0	Current Year Tuition and Fees Schedule		Not Received	
0	Essay 1		Not Received	
0	Essay 2		Not Received	
0	Essay 3		Not Received	
0	Proof of Citizenship		Not Received	
0	Resume/CV		Not Received	
0	Unofficial Transcript		Not Received	
Ch	oose File No file chosen Upload			
			SAVE & CO	NTINUE
) M B No	. 0915-0146 Expiration Date: 05/30/2017			

Business Rules, cont:

- Applicants are encouraged to upload .PDF documents.
- System shall allow applicant to upload documents up to 5 MB in size.



Section 12: Self Certification

The Self Certification page allows the applicant to certify that he/she has read and agreed to the terms and agreements displayed on the page. The applicant must agree to all certifications in order to continue.

Self Certification CERTIFICATION REGARDING DEBARMENT, SUSPENSION, DISQUALIFICATION AND **RELATED MATTERS FORM:** Pursuant to 2 CFR 180.335 (2006) as implemented by 2 CFR 376.10 (2007), an applicant applying to enter into a 3. Applicant covered transaction (which includes an application to participate in the NHSC SP) is required to notify the Federal Continue) agency office if the applicant knows that he or she: Is presently debarred, suspended, excluded, or disqualified from participation in covered transactions by any Notes: Federal agency or department; • Within the 3-year period preceding the application, has been convicted of, or had a civil judgment rendered against him or her for any of the following offenses: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a • public (Federal State, or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, receiving stolen property, making false claims, or obstruction of justice; Is presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with the commission of any of the offenses set forth above; or Within a 3-year period preceding the application, has had any public transaction (Federal, State, or local) terminated for cause or default. I certify that the above statements do not apply to me. * I certify that I have read and understand the terms of the 2016 NHSC SP Application and Program Guidance * SAVE & CONTINUE O M 8 No. 0915-0146 Expiration Date: 05/30/2017

Steps:

- Applicant reviews each certification.
- 2. Applicant indicates that he/she agrees to each certification by selecting the checkbox.
- SAVE & CONTINUE (Save and
- System shall require that the applicant has responded to each certification question in order to proceed.
- System will clear the Self Certification page if the applicant proceeds to the Review and Submit page but then navigates to another section of the application.



Section 13: Review & Submit

The Review & Submit page is the last page of the application, which includes a table listing each application section and its corresponding status. All sections must be complete in order for the applicant to submit the application. The applicant can select the top navigation menu or a page name link in the table to view that section.

Review & Submit

Please review each of the sections listed below prior to submitting your application.

You may edit your application up until the deadline, however you will need to re-submit by the deadline to be considered for an award. After submission, your final application will be available to review, download, and print in PDF format on the Home page. All supporting documents will be listed on the Home page along with the school, discipline, and number of years of funding you have requested. The deadline to submit the NHSC SP application is September 29, 2016 at 7:30 PM EDT.

Page Name	Status
Assurances	Complete
Eligibility	Complete
General Information	Complete
Background Information	Complete
Degree Information	Complete
Letters of Recommendation	Complete
Supporting Documents	Complete
Self Certification	Complete
Review & Submit	In Progress

SUBMIT YOUR APPLICATION:

I certify that the information given in this application, including supporting documentation uploaded into this application, is accurate and complete to the best of my knowledge and belief. I understand that it may be investigated and that any willfully false representation is sufficient cause for rejection of this application, or, if awarded, that I am liable for repayment of all awarded funds and further that any false statement herein may be punished as a felony under U.S. Code, Title 18, Section 21001 and subject me to civil penalties under the Program Fraud Civil Remedies Act of 1986 (45 CFR 79)

Enter your password to sign *
SUBMIT
OMB No.0915-0146 Expiration Date: 05/30/2017

Steps:

- 1. Applicant reviews the application.
- 2. The Applicant enters his/her password.
- 3. Applicant selects **SUBMIT** (Submit).

- System shall not allow application to be submitted after the application deadline (05/07/2016).
- All page statuses except for Review & Submit must be complete for applicant to submit his/her application.
- Applicant must enter his/her password in order to submit his/her application.
- Upon submission, the applicant will be directed to the submitted landing page, with links to uploaded documents and a .PDF version of his/her submitted application.
- Upon submission, the system will validate the applicant's SSN to ensure the following is still true:
 - There are no duplicate SSNs for the same program and cycle.
 - o SSN is not on the black list.
 - SSN is not associated with a participant that is defaulted or waivered.
 - If applicant has an existing service obligation, the obligation end date is in the past (obligation end date must be before submission date).



Section 14: Submitted Landing Page

After the applicant submits his/her NHSC SP application, he/she will be directed to the Submitted landing page, and the overall application status will change to either "Submitted" or "Submitted – Ineligible." If any of the responses on the online application deemed an applicant ineligible, the status upon submission will be "Submitted – Ineligible." If the responses submitted deem the applicant eligible, the application status will be "Submitted." On the Submitted landing page, the applicant will have the ability to edit or withdraw his/her application. The applicant will have the ability to edit his/her application any time prior to receiving a Confirmation of Interest (COI).

NHSC Scholarship Program Application

Hello Kate. You have submitted your 2016 National Health Service Corps (NHSC) Scholarship Program online application and all required supporting documents! Your overall application status is: Submitted Your application ID is: 322600 School Name: Georgetown University - School of Medicine Discipline: Allopathic Physician Number of funding years requested: 1 View your submitted application Take a few moments to review your application to ensure that your responses accurately reflect your intent and that ALL your supporting documents are complete. Applications that are incomplete, or that have missing or ineligible documents will not be reviewed or considered for an award. For further guidance, please refer to the 2016 NHSC Scholarship Program Application and Program Guidance. If you wish to make changes to your application or upload other documents, you may do so prior to the application deadline (September 29, 2016 at 7:30 PM EDT), by clicking the Edit Application button below. Important Note: Selecting to edit your application will automatically un-submit your application. Once you have made edits, you MUST follow the steps to resubmit your application before the application deadline (September 29, 2016 at 7:30 PM EDT). If you would like to view a read-only copy of your application, without having to resubmit, please click the View Your Submitted Application button at the top of this page. Edit Application If you are no longer interested in the 2016 NHSC Scholarship Program award, please click the button below to

If you are no longer interested in the 2016 NHSC Scholarship Program award, please click the button below to withdraw your application. Once you withdraw your application, you may resubmit your current application using the edit button above until September 29, 2016 at 7:30 PM EDT. Applications not resubmitted by this time will not be considered for an award.

Withdraw

It is important to keep your contact information accurate and up to date. If updates are necessary, please make the appropriate changes on the Account Settings page.

Business Rules:

• An applicant can navigate to the Submitted landing page by clicking the "Home" button.

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GENERAL SUPPORTING DOCUMENTS				
Document Title	Document Name	Status		
Acceptance Report/Verification of Good Standing	2016 nosp app content.docx	Received		
Authorization to Release Information	BMISS Background & Onboarding.docx	Received		
Current Year Tuition and Fees Schedule	BMISS Background & Onboarding.docx	Received		
Essay 1	2016 nosp app content.docx	Received		
Essay 2	2016 nosp app content.docx	Received		
Essay 3	2016 nosp app content.docx	Received		
Proof of Citizenship	BMISS Background & Onboarding.docx	Received		
Resume/CV	BMISS Background & Onboarding.docx	Received		
Unofficial Transcript	flip content 2016.docx	Received		



Section 15: View Your Submitted Application

If an applicant would like to view a .PDF version of his/her completed application after submission, he/she may do so by clicking the "View your Submitted Application" button. An applicant is able to access the "View your Submitted Application" button both before and after the application deadline.

ΙH	ISC Scholarship Program Application
Hell	lo Kate,
You requ	have submitted your 2016 National Health Service Corps (NHSC) Scholarship Program online application and all Jired supporting documents!
You	r overall application status is: Submitted
You	r application ID is: 308566
Sch	ool Name: Georgetown University - School of Medicine
Dis	cipline: Allopathic Physician
Nur	nber of funding years requested: 2
Vi	ew your submitted application
Tak your will Pro g	e a few moments to review your application to ensure that your responses accurately reflect your intent and that ALL r supporting documents are complete. Applications that are incomplete, or that have missing or ineligible documents not be reviewed or considered for an award. For further guidance, please refer to the 2016 NHSC Scholarship gram Application and Program Guidance.
lf yo dea	u wish to make changes to your application or upload other documents, you may do so prior to the application dline (September 29, 2016 at 7:30 PM EDT) , by clicking the Edit Application button below.
imp edit 7:30 Viev	ortant Note: Selecting to edit your application will automatically un-submit your application. Once you have made s, you MUST follow the steps to resubmit your application before the application deadline (September 29, 2016 at I PM EDT). If you would like to view a read-only copy of your application, without having to resubmit, please click the v Your Submitted Application button at the top of this page.
E	lit Application
lf yo Voui	u are no longer interested in the 2016 NHSC Scholarship Program award, please click the button below to withdraw r application. Once you withdraw your application, you may resubmit your current application using the edit button

Section 16: Edit Application (Prior to Application Deadline)

An applicant has the ability to edit his/her application after submission and prior to the application deadline. If an applicant edits his/her application, the applicant must re-submit his/her application by the application deadline. If the applicant does not resubmit his/her application, the application status will update to "Not Submitted at Deadline" when the application closes, and the applicant will not be considered for an NSHC SP award.

NHSC Scholarship Program Application

Hello Kate.

You have submitted your 2016 National Health Service Corps (NHSC) Scholarship Program online application and all required supporting documents!

Your overall application status is: Submitted

Your application ID is: 308566

School Name: Georgetown University - School of Medicine

Discipline: Allopathic Physician

Number of funding years requested: 2

View your submitted application

Take a few moments to review your application to ensure that your responses accurately reflect your intent and that ALL your supporting documents are complete. Applications that are incomplete, or that have missing or ineligible documents will not be reviewed or considered for an award. For further guidance, please refer to the **2016 NHSC Scholarship Program Application and Program Guidance**.

If you wish to make changes to your application or upload other documents, you may do so prior to the application deadline **(September 29, 2016 at 7:30 PM EDT)**, by clicking the Edit Application button below.

Important Note: Selecting to edit your application will automatically un-submit your application. Once you have made edits, you MUST follow the steps to resubmit your application before the application deadline (**September 29, 2016 at 7:30 PM EDT**). If you would like to view a read-only copy of your application, without having to resubmit, please click the View Your Submitted Application button at the top of this page.

East Application

If you are no longer interested in the 2016 NHSC Scholarship Program award, please click the button below to withdraw your application. Once you withdraw your application, you may resubmit your current application using the edit button

must click Save & Continue at the bottom of the page where edits were made in order for the edits to be saved.

7. Once all edits are complete and saved, the applicant will navigate to the Self Certification page.

<u>Steps</u>:

- 1. The applicant clicks Edit Application button.
- 2. System shall display a pop-up when the applicant clicks on the "edit" application button (see screen shot below).

You will need to resubmit your application once you choose
to "Edit Application". If you click "Cancel" no changes will be
made to your application.

CANCEL

EDIT APPLICATION

- 3. The applicant can choose to "Edit Application" or "Cancel".
- 4. If the applicant clicks "Edit Application," he/she will be directed to the in progress landing page (see screenshot on next page).
 - If the applicant clicks "Cancel," he/she will remain on the submitted landing page.
- 5. The applicant can navigate to any section of the application to make desired edits.

6. Once the applicant has made his/her edits, the applicant s to be saved.

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NHSC Scholarship Program Application

Hello Kate,

Welcome back to the National Health Service Corps (NHSC) Scholarship Program (SP) online application!

Your overall application status is: In Progress

Your application ID is: 308566

O M 8 No. 0915-0146 Expiration Date: 05/30/2017

You will be asked for your application ID for any program or technical support needed.

Application Deadline: September 29, 2016 at 7:30 PM EDT

Please select Continue to resume filling out the online application.

Page Name	Status
Assurances	Complete
Eligibility	Complete
General Information	Complete
Background Information	Complete
Degree Information	Complete
Letters of Recommendation	Complete
Supporting Documents	Complete
Self Certification	Not Started
Review & Submit	Not Started

CONTINUE

- 8. Applicant indicates that he/she agrees to all the certifications by selecting all checkboxes.
- 9. Applicant **SAVE & CONTINUE** (Save and Continue).
- 10. Applicant is directed to the Review & Submit page.
- 11. Applicant reviews the application.
- 12. The Applicant enters his/her password.
- 13. Applicant selects **SUBMIT** (Submit) and is directed to the Submitted landing page.

- The applicant will not be able to edit his/her application after the application cycle closes.
- System shall display a pop-up when the applicant clicks on the "Edit Application" button.
- Applicant will be directed to the In Progress landing page if he/she clicks "Edit Application"
- System shall remain on the Submitted Landing Page if the applicant clicks "Cancel."
- An applicant must resubmit his/her application prior to the application deadline if he/she wishes to be considered for an NHSC SP award.



Section 17: Withdraw Application

An applicant has the option to withdraw his/her application after submission. The applicant may resubmit the current application by using the "Undo Withdrawal" button. *However, the applicant must resubmit his/her application by the application deadline to be considered for an award*.

NHSC Scholarship Program Application

Hello Kate,

You have submitted your 2016 National Health Service Corps (NHSC) Scholarship Program online application and all required supporting documents!

Your overall application status is: Submitted

Your application ID is: 308566

School Name: Georgetown University - School of Medicine

Discipline: Allopathic Physician

Number of funding years requested: 2

View your submitted application

Take a few moments to review your application to ensure that your responses accurately reflect your intent and that ALL your supporting documents are complete. Applications that are incomplete, or that have missing or ineligible documents will not be reviewed or considered for an award. For further guidance, please refer to the 2016 NHSC Scholarship Program Application and Program Guidance.

If you wish to make changes to your application or upload other documents, you may do so prior to the application deadline (September 29, 2016 at 7:30 PM EDT), by clicking the Edit Application button below.

Important Note: Selecting to edit your application will automatically un-submit your application. Once you have made edits, you MUST follow the steps to resubmit your application before the application deadline (September 29, 2016 at 7:30 PM EDT). If you would like to view a read-only copy of your application, without having to resubmit, please click the View Your Submitted Application button at the top of this page.

Edit Application

If you are no longer interested in the 2016 NHSC Scholarship Program award, please click the button below to withdraw your application. Once you withdraw your application, you may resubmit your current application using the edit button above until September 29, 2016 at 7:30 PM EDT. Applications not resubmitted by this time will not be considered for an award.

Withdraw

Steps:

- 1. From the Submitted landing page, applicant will click the Withdraw (Withdraw) button.
- 2. The applicant will be directed to the "Withdraw Application" screen for confirmation.
- 3. The applicant clicks **Withdraw** (Withdraw) and is directed to the Submitted Home page (see screenshot on next page).
 - Note: The applicant's status will be updated to "Withdrawn."



NHSC Scholarship Program Application

Hello Kate,

Your overall application status is: Withdrawn

Your application ID is: 308566

UNDO WITHDRAWAL

GENERAL SUPPORTING DOCUMENTS

Document Title	Document Name	Status
Acceptance Report/Verification of Good Standing	2016 NCSP Application Content_Final V2- 1-7-15 (2) (1).docx	Received
Authorization to Release Information	2016 NCSP Application Content_Final V2- 1-7-15 (2) (2).docx	Received
Current Year Tuition and Fees Schedule	2016 NCSP Application Content_Final V2- 1-7-15 (2).docx	Received
Essay 1	2016 NCSP Application Content_Final V2- 1-7-15 (2) (2).docx	Received
Essay 2	2016 NCSP Application Content_Final V2- 1-7-15 (2) (2).docx	Received
Essay 3	2016 NCSP Application Content_Final V2- 1-7-15 (2) (2).docx	Received
Proof of Citizenship	2016 NCSP Application Content_Final V2- 1-7-15 (2) (2).docx	Received
Resume/CV	2016 NCSP Application Content_Final V2- 1-7-15 (2).docx	Received
Unofficial Transcript	2016 NCSP Application Content_Final V2- 1-7-15 (2) (1).docx	Received

- On the Submitted landing page the applicant may undo his/her withdrawal by clicking (Undo Withdrawal), if the application deadline has not passed.
- 5. If the applicant clicks UNDO WITHDRAWAL (Undo Withdrawal), he/she will be directed to the In Progress Landing Page
- 6. The applicant may make any edits to his/her application prior to the application deadline.
- 7. If the applicant makes changes to his/her application, he/she must re-submit his/her application prior to the application deadline.

Business Rules:

• The ability to withdraw an application will be disabled if/when the applicant is sent a Confirmation of Interest (COI).

Withdraw Application

You have indicated that you are no longer interested in the 2016 NHSC Scholarship Program award. Selecting the Withdraw button below will remove your application from consideration and you will no longer be eligible for an award. Once the application deadline (September 29, 2016 at 7:30 PM EDT) has passed, you will not be able to undo this action. If you do not wish to withdraw your application, click the "Home" button above and it will take you back to the "Submitted" landing page.

• If an applicant wishes to resubmit his/her application, he/she must resubmit by the application deadline.



WITHDRAW

Section 18: Account Settings

An applicant is able to change his/her password, email address and security question on the Account Setting page. In addition, the applicant will be able to view his/her application ID.

Account Settir	ngs		
Application ID: 238185			
ACCOUNT EMAIL AD	DDRE88		
The email address for your as	coount is your username	. This is also the email address which the B	areau of Clinician and
Recruitment Services (BCRS) will use for all commun	icationa.	
CHANGE EMAIL ADI	DRE88	CHANGE PASSWORD	
New Email Address		Create New Password	
Confirm New Email		Capitan Mary Pressured	
Address			
Current Password		Current Password	
Change Email		Change Password	
CHANGE RECUBITY	INFORMATION		
Security Question	Select		
	ocica		
Answer			
Current Password			
Change Security Int	formation		
HOME (PERMANENT) ADDRE 88		
Line 1		145 River Road	
Line 2		Ageriment 204	
Country *		United States	
State Province Region *		Colorado 🗹	
City -		Denver	
ZigiPostal Code *		12245	
PREFERRED MAILIN	IG ADDRE88		
My preferred mailing addr	reas is the same as my?	tome address	
Line 1	175 Walker Ave		
Line 2			
Country -	United States	V	
State/Province/Region *	New Jersey		
City -	Trenton		
Zip/Postal Code *	89654		

Steps to Reset password:

- 1. Applicant creates new password.
- 2. Applicant confirms new password.
- 3. Applicant enters current password.
- 4. Applicant clicks Change Password (Change Password)
- 5. System displays confirmation that password has been successfully updated.

Steps to Change Email Address:

- 1. Applicant enters a new email address.
- 2. Applicant confirms the new email address.
- 3. Applicant enters current email address.
- 4. Applicant enters current password.
- 5. Applicant clicks Change Email (Change Email).
- 6. A verification email will be sent to the new email address.
- 7. Applicant clicks on link in the email to verify his/her new email address.

- System shall add validation that username/email address is not in use by another account when changing.
- System shall provide functionality for applicant to change security question and answer.
- System shall require applicant to log out and log back in upon changing his/her username/email or password.



Section 19: Emails

There are several emails that are sent out during the application process:

1) When applicant creates an account, the applicant receives the following activation email:





NHSC SP Online Application User Guide

2) When applicant requests a recommendation, the recommender receives the following email request:

bmiss@voosh.de	12:04 PM (1 hour ago) 💥	*	•			
Dear Dr. Jackson Edwards.						
Andy Robins has requested that you complete a letter of recommendation for his/her scholarship application for the National Health Service Corps (NHSC). In order to complete this recommendation, please select the following link:						
https://testbcrs.hrsa.gov:443/extranet/application/nhscsp/upload-letter.seam?requestId=2381857	1393434200602					
Once you have navigated to the letter of recommendation page, please confirm that all of the applicant and your information are correct. You will have the ability to upload the letter of recommendation. Please note that the applicant will be unable to submit their finalized application until your recommendation has been submitted. If you experience any trouble with the link or this website please contact the Customer Care Center at <u>1-800-221-9393</u> .						
Sincerely,						
National Health Service Corps Scholarship Program						



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3) When recommender uploads a letter of recommendation, the applicant receives the following email:

Dear Ashley Test,

Your letter of recommendation request has been completed by Mrs. Frances Test. Once both letters of recommendation have been completed, you will be able to submit your application.

Sincerely, National Health Service Corps Scholarship Program



Section 20: Resolving Issues

Please use the following instructions to resolve any inquires a NHSC SP applicant might have:

1. For Technical Issues:

Production Support Process:

 When a technical issue is encountered, e.g. Applicant cannot upload his/her Resume, the Customer Care Center should log the issue in the BMISS Issue Tracker. The NHSC SP Application BMISS HyperCare team will monitor the BMISS Issue Tracker to define and resolve the issue. Once the issue is resolved, the HyperCare team will notify the Customer Care Center Analyst of the resolution.

Capturing Issues:

- It is important to capture and log as much detail as possible. The BMISS HyperCare Support Team will need enough information to recreate the issue in order to solve the problem. Applicant details should include the following:
 - Applicant information:
 - Full name
 - Last four digits of SSN
 - Email address
 - Phone number
 - The exact NHSC SP Online Application screen the applicant was on when the issue occurred (screenshot if applicable)
 - The Web Browser the applicant was using (e.g. Internet Explorer, Firefox, etc.)
 - The frequency of the issue (e.g. always, sometimes, etc.)

2. For Program Related Issues:

Division Support Process:

 If an applicant has a program question, the Customer Care Center will try to answer the problem by referring to the Application and Program Guidance. If the Customer Care Center is unable to answer the question then the Applicant's question and information are recorded and the Customer Care Center contacts the appropriate DNHSC Analyst. DNHSC answers the question and the Customer Care Center responds back to the Applicant.

Online Application Technical Issues Email:

BMISS HyperCare Support Contact: Ashley Carothers- <u>ACarothers@hrsa.gov</u> or Christopher Galipo- <u>CGalipo@hrsa.gov</u>

Capturing Applicant Information:

- The following applicant information should be captured with as much detail of the issue as possible:
 - o First and Last Name
 - o Email Address
 - o Phone Number
 - Last four digits of SSN
 - o Section of Online Application the user was on when they encountered the problem
 - o Detailed summary of the problem
 - Supporting Document (If applicable)

