

## Bay St. George Chapter – Continuing Education Bursary

### NOTE: THIS IS NOT AN APPLICATION FORM

This bursary is available to members residing in the Bay St. George area who are participating in a continuing education program or event. The continuing education (CE) bursary will only be awarded if there are no suitable applicants for the Bay St. George academic scholarship.

You will be required to provide the following information on your application:

#### A. Personal Information

- Contact information (Name, Address, Phone, E-mail\*)
- ARNNL Registration Number **\*REQUIRED**
- Social Insurance Number (Required for [Income Tax](#) purposes)
- Length of time living in NL
- Previous Trust bursaries and year received

#### B. Employment Details

Employment details are used to demonstrate the relevance of the program/event to your nursing practice.

- Employer – RHA, Educational Institution, Private/Self Employed, Other
- Site (e.g., St. Clare's Mercy Hospital)
- Area of Responsibility/Specialty Area **\*REQUIRED**

NOTE: Please use your area of practice, **not** your employment position

#### C. Course/Program/Certification Details

- How the program/event relates to your nursing practice (checkboxes) – question is to be completed whether you are applying for a conference/workshop, program/course or certification.

##### (i) Conference/Workshop

- Conference/Event title
- Organizers
- City/Town and Province (or State/Country if event is international)
- Dates
- Are you presenting at the conference?

##### (ii) Program or Course (e.g., post-basic course/program, etc.)

- Program/Course (name/title)
- Offered by
- Start Date/End Date
- Number of courses required
- Are you currently enrolled in/registered for the CE Event?

##### (iii) Certification

- Certification (e.g., specialty, Diabetes Educator, etc.)
- Organizers
- Certification Date
- Currently enrolled/exam scheduled

#### D. Budget

- Costs – include eligible costs (with applicable taxes)
  - Registration
  - Travel

- Accommodation
- Other
- Total Cost
  
- Other Sources of Financial Assistance
  - Funding source and amount of any funding you have applied for or received to date to assist with the costs of the program/event and whether the funding has been approved.

**E. Personal Statement**

- A brief statement (maximum **250** words) about how the continuing education will enhance your nursing practice.

**Important Notes:**

- If your application is successful, you will be required to submit **verification of eligible costs** (e.g., receipt for tuition and/or exam fees) and **proof of successful attendance** (conference/workshop) or **proof of successful completion** of the course/program/certification exam to claim your bursary. Any additional documentation requirements will be outlined in the notification email you receive from the Trust.
- If you are successful in achieving **full funding** from other sources, you will be asked to accept the other funding. If you receive notification that you have received full funding after you have received your bursary from the Trust, you are ***required to notify the Trust and return the Trust funds.***

**Updated: June 2018**