



**2024 EDUCATION BURSARY AWARD INFORMATION SHEET
FOR
VGH GRADUATES and
DESCENDANTS OF VGH GRADUATES**

**Please read this notice carefully before filling out
your application forms.**

A bursary award given by the VGH/SON Alumnae Association through the Education Committee is a reimbursement award.

This means the courses must be completed in the previous academic year (between September 01, 2023 to August 31, 2024)

You must be continuing in your nursing studies unless:

1. You completed your program in 2024 or,
2. You are applying for funding for a workshop, conference, convention, seminar, or recertification.

2024 EDUCATION BURSARY AWARD INFORMATION SHEET FOR VGH GRADS, UBC/VGH COLLABORATIVE NURSING GRADS, or DESCENDANTS OF VGH GRADUATES

V.G.H. School of Nursing Alumnae Association Education Committee
855 West 12th Avenue, Vancouver, B.C. V5Z 1M9 (604) 875-4111, Local 62049

Please read this notice carefully before filling out your application form.

Purpose: To provide financial assistance to VGH grads, UBC/VGH Collaborative grads, or descendants of VGH graduates pursuing studies in a nursing education program.

Source of Funds: This association has bursary awards available to VGH & UBC/VGH graduates, and descendants of VGH graduates. The money allotted is based on annual interest accrued from the Harvey/Cain Endowment Fund, the Eileen Lewis Johnston Memorial Fund, the Grace Sterling Smith Fund, the Margaret Faulkner Fund, the Edith Mary (McCallan) Cork Memorial Bursary, the Inez (Fox) Mowat Memorial Bursary, private donations, and the Alumnae Association education funds.

Priority: VGH Graduates will be given priority followed by descendants of VGH graduates who are residents of BC before other descendants residing elsewhere in other countries.

BURSARY AWARD CATEGORIES

\$2,000.00* (or less) towards a Degree Program: Baccalaureate, Master's, Doctorate, or Nurse Practitioner	\$800.00* (or less) towards a Non-Degree Program: e.g. Licensed Practical Nurse	\$500.00* (or less) towards a: Conference, Seminar, Workshop, Re-Certification
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* (or less) - at the discretion of the Education Committee based on the funds available.

ELIGIBILITY: Graduates of the V.G.H. School of Nursing program, or UBC/VGH Collaborative Nursing Program, or Descendants of the previously mentioned. VGH graduate or the descendant's supporting graduate must be a paid-up member V.G.H. School of Nursing Alumnae Association (\$20.00 yearly fee). The program must be applicable to nursing related studies. Courses must be taken between September 01, 2023, and August 31, 2024

APPLICATIONS: Applications are available through the Alumnae office or Online at: info@vghnursingschoolalumnae.com

DEADLINE:
September 30, 2024. **All documentation must accompany the application form and be submitted to the Alumnae office or fill in the forms online and email to vghnursingbursaries@gmail.com no later than September 30, 2024.**

ENROLMENT: All applicants must provide proof of current enrolment in an education program. A letter of acceptance from the Registrar's Office is required for an academic program.

BURSARY AWARDS: The Education Committee will determine these awards in October and all candidates will be notified by mail or email.
Note: Priority consideration will be given to those candidates who have not previously received educational funding. Eligible candidates may be chosen by random selection when funds are limited.

APPLICATION WITHDRAWAL Please notify the Education Committee at vghnursingbursaries@gmail.com as soon as possible if you withdraw your application.

Revised: April 2024

VGH BURSARY AWARD APPLICATION FORM (page 2 of 3)

I. GENERAL INFORMATION: (Please print)

Name: _____
(Surname) (Given Names)

Date of Birth: _____

Address: _____ Postal Code: _____

Mailing address (if different): _____

Email address: _____

Telephone: Home: _____ cell: _____ work: _____

SIN: _____

II. VGH Graduates

VGH S.O.N. Alumnae Association Membership:

Have you renewed your membership for this year?

Yes _____

No _____ (If no, please enclose a \$20.00 cheque in CDN Funds payable to: VGHSON Alumnae Association)

III. Descendants of VGH Graduates

VGH SON Alumnae Association Membership

Supporting VGH Graduate's name at graduation: _____

VGH Graduation class: _____ year: _____

Relationship to applicant: _____

Has the supporting VGH Graduate renewed his/her membership for this year?

Yes: _____

No: _____ (If no, please enclose a \$20 cheque in CDN Funds payable to: VGHSON Alumnae Association)

IV. Alumnae Funds

Have you ever previously received VGH/SON Alumnae educational funds?

Yes: _____ Year(s): _____ Amount(s): _____

No: _____

IV.

BURSARY AWARD AGREEMENT AND SIGNATURE

In the event I receive a bursary award, I agree:

1. to acknowledge receipt of the cheque in writing
2. to return the award to the VGH/SON Alumnae Association if I am unable to use the money for my studies
3. to have my name published in the VGH/SON Alumnae Association Spring Newsletter
4. to have my supporting VGH graduate's name published in the VGH/SON Alumnae Spring Newsletter

Date: _____ Signature: _____

VGH BURSARY AWARD APPLICATION FORM 3/3

*PLEASE COMPLETE ONE OF THE FOLLOWING: "A" or "B"

I am applying for:

A. \$2,000.00 Bursary Award _____ (part time or full time)

Toward a Degree Program: Baccalaureate _____ Masters _____ Doctorate _____ Nurse Practitioner _____

B. \$600.00 Bursary Award _____ (part time or full time)

Toward a Non-Degree Program: e.g. Licensed Practical Nurse _____ Other _____

COURSE DETAILS: **INSTITUTION** _____

NB: Courses listed must be between Sept 1, 2023, and Aug. 31, 2024

<u>Course Name</u>	<u># of Credits</u>	<u>Cost</u>	<u>Dates: Start(D/M/Yr.)</u>	<u>Finish(D/M/Yr.)</u>
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				

** Courses may be listed on a separate paper if desired**

APPLICATION DETAILS: In order for your application to be processed, the following documentation must accompany your application:

- ___ Covering letter outlining your educational goals.
- ___ Two letters of reference dated in this bursary year from a teacher, professor, nurse educator, former employer, or colleague.
- ___ Confirmation of current enrolment by letter/form signed by an official representing the college/university in which you are enrolled.
- ___ SIN number
- ___ Statement of fees paid for courses taken between Sept 1, 2023, and Aug. 31, 2024

C. \$500.00 Bursary Award _____
Toward a: Workshop _____ Conference _____ Seminar _____ Convention _____
Recertification _____ Other _____

COURSE DETAILS: **INSTITUTION** _____

Course Name	# of Credits	Cost	Dates: Start(D/M/Yr.)	Finish(D/M/Yr.)
1. _____				
2. _____				
3. _____				

APPLICATION DETAILS: In order for your application to be processed, the following documentation must accompany your application:

- ___ Covering letter of intent.
- ___ Copy of course and/or pamphlet.
- ___ Statement of Fees Paid
- ___ Certificate of Attendance (photocopy).

Date: _____ **Signature:** _____
Applicant

Revised: April 2024

NURSE PRACTITIONER BURSARY

**The Edith Mary (McCallan) Cork Memorial Bursary
\$2,500.00**

This bursary has been chosen by the family to be awarded to a **Registered** Nurse who is studying to become a **Nurse Practitioner**.

To be eligible you must be continuing in the Nurse Practitioner program, or, successfully completed the program in 2023.
VGHSONAA Bursaries are a reimbursement award.

If you qualify, please indicate below, and follow the rest of the application form on page 3.
One Edith Cork Memorial Bursary to be awarded each year.

Name: _____

Revised: April 2024
