

Bachelor of Science in Nursing (Collaborative) Scholarship Year 2, 3, 4

NOTE: THIS IS NOT AN APPLICATION FORM

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

A. Application Information

- School of Nursing - You **MUST** identify your school of nursing in order for your application to be submitted successfully
- Program Year
Your application will only be considered for those scholarships for which you meet *all of the criteria*.

B. Personal Information

- Contact Information (Name, Address, Phone, E-mail)
- Student Number
- Social Insurance Number (required for [income tax purposes](#))
- Previous Trust scholarships or bursaries and year received

C. Work Experience

- Employer, Position and Date of Employment (4 most recent)

D. Extracurricular Activities

- List any student or community volunteer activities (used to help demonstrate actual or potential contribution to nursing)
 - o Association/Organization, Position/Office Held and Date

E. Achievements

- Post-secondary awards/honors (academic or community) and year received (4 most recent)

F. Financial Assistance

- Scholarships, bursaries or grants received for current academic year
Type of assistance, funding and source amount

G. Personal Statement

- A brief statement about your professional career plans that addresses your commitment to nursing (maximum **500** words)

H. Reference

- One reference from a **nursing faculty member** in your current program who can indicate your academic ability and potential for contributions to nursing.
You must provide the name and employment information (employer, position) of your referee.
You **MUST** provide your referee with your student number. They will not be able to submit the online reference form without it.