



Application Form

CHNIG Professional Development Bursary

To Attend the Annual 2018 RNAO and CHNIG Annual AGMs

Thursday, April 19th - Saturday, April 21st, 2018

Title (circle one):	Mr.	Miss	Ms.	Mrs.	Dr.	Other:		
Last Name:		First Name:						
Street:								
City:		Province:			Postal Code:			
Phone number (with area code): Home				Work				
		Othe	er					
Email:								
Position (circle one):	Reg	istered Nu	ırse	U	ndergra	duate Nursing Student		
RNAO Registration No	umber:							
How long have you been a member of CHNIG? (include dates):								
Current Employer, area of practice, position, role:								

Criteria for personal summary includes:

- 1. RN with a minimum two year membership in CHNIG or a student with a minimum one year membership
- 2. Evidence of involvement (past/present) in your professional association(s) (CHNIG, RNAO, CHNC, etc.).
- **3.** Please provide a paragraph outlining your professional objectives in attending the AGMs.
- **4.** ANTICIPATED EXPENSES: Provide an itemized list and description of anticipated expenses (i.e., mileage by car, price for GO train, hotel, meals, etc.). Use the budget template below. Winners will complete this paperwork within a month of the Conference or forfeit the bursary.

Budget Template	
ANTICIPATED EXPENSES: Provide detailed description, including itemized list, calculation and justification.	Amount
TOTAL AMOUNT	

- 5. Strategies to share learning from the meetings with others (e.g. nursing colleagues, students, other health care professionals etc.).
- **6.** Please add the following to your document: "I certify that all information contained in this application is true and accurate," followed by the date and your signature.
- 7. Please send completed applications by Friday, March 30th, 2018 @11:59 p.m. to MemberBenefits@CHNIG.org.
- 8. Applicants will be required to sign a Conditions of Acceptance Form upon notification.

Please note: Preference will be given to those who have NOT BEEN previously funded or those seeking funding for the first time.