

Application Form: Jean Stone Scholarship 2020

1.	Your personal details	
a)	Name:	
b)	Address:	
c)	Postal code:	
d)	Telephone number:	_
e)	Email address:	_
2.	Palliative care organization for which you volunteer	
a)	Name of organization:	_
a) b)	Name of organization: Address:	_
		-
b)	Address:	-
b) c)	Address: Postal code:	-
b) c)	Address: Postal code: Telephone number:	-

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h)	Email address of volunteer coordinator/supervisor:
3.	Course/conference you wish to apply for
a)	Title of course/conference:
b)	Location:
c)	Date: (NOTE: courses/conferences before 1st June 2019 are NOT eligible)
d)	Cost of course/conference: \$
e)	In no more than 500 words, explain: What you expect to learn from the course/conference How this will impact the care/support you provide

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4.	Funding	
,	Have you applied for the Stone Scholarship before? Y/N res, when? Date:	
•	Are you applying for other sources of funding to cover this course/conference? Y/N res, please give details below.	
c)	Organization you are applying to:	
d)	Amount you are applying for: \$	
5.	Checklist	
□ Are you a current member of AHPCA?		
□ F	Have you included a letter of support from your volunteer coordinator or supervisor?	
	Have you included an electronic copy of the course/conference registration document invoice for which you are applying for this scholarship?	

PLEASE NOTE

The closing date for applications is **5pm March 31**st **2020**. Applications can be emailed to: director@ahpca.ca or posted to AHPCA, #110, 105 12 Ave SE, Calgary AB, T2G 1A1. Mailed applications and emails that are dated after the deadline will not be accepted.