

## **Dave Patterson Memorial Board of Certification Bursary**

### **Application Criteria**

This bursary provides full payment of Board of Certification examination fee only (subject to fees set by board).

#### *Criteria:*

- a)** Applicant must have been a CIPHI Ontario Branch student member in good standing for at least two years prior to application.
- b)** Applicant must be sitting the examination in the year application is made.
- c)** A letter of reference must be submitted from the practicum employer on institutional letterhead stating why applicant is deserving of the bursary.

#### *Application Process:*

- a)** Complete the attached application and submit application to the Membership Support and Engagement Councillor via email ([membership@ciphi.on.ca](mailto:membership@ciphi.on.ca)).
- b)** Applicant will submit a Letter of reference from their practicum employer along with application.
- c)** Applications will be reviewed by the Membership Support and Engagement Councillor and Membership Committee who will forward successful applicant to the Branch Executive for approval.

#### *Remittance of Bursary:*

- a)** Following remittance of the bursary, the recipient must submit a 500 word report on their BOC experience to CIPHI Ontario branch executive via the Membership Support and Engagement Councillor. This report will:
  - Outline the recipient's BOC experience;
  - Provide recommendations on how to improve the BOC process;
  - Provide recommendations to BOC future students.

Report is due within 30 days of sitting the BOC examination. (Note: Report will also be provided to the Ontario BOC representative.)

- b)** The award recipient must submit proof of examination payment to CIPHI Ontario Branch within 30 days of the examination.
- c)** Once both a) and b) are received and approved by CIPHI Ontario Branch executive, a cheque will be issued to the award recipient within 30 days.
- d)** Recipients are eligible to receive this award once in a lifetime.

## Dave Patterson Memorial Board of Certification Bursary Application Form

### Applicant

**Name:** [Click here to enter text.](#)

**Address:** [Click here to enter text.](#)

[Click here to enter text.](#)

**Phone:** [Click here to enter text.](#)

**Email:** [Click here to enter text.](#)

**Health Unit or Place of Employment (if applicable):** [Click here to enter text.](#)

**Date of Examination:** [Click here to enter a date.](#)

**I acknowledge that I have been a student member of good standing for at least two years prior to this application.\***

Yes No

*\*Note: This will be verified.*

### Remittance of bursary:

If selected as the recipient of this bursary, the following will be required:

- A letter of reference from your practicum employer (*to be included with application*).
- Submit a 500 word report detailing BOC experience and any relevant recommendations you feel would be beneficial to future BOCs and students must be submitted to the Membership Support and Engagement councillor at [membership@ciphi.on.ca](mailto:membership@ciphi.on.ca) (*within 30 days of completing examination*).
- Receipt of BOC Exam payment must be provided to CIPHI Ontario Branch (*within 30 days of sitting the BOC exam*).

I understand the above requirements.

**Name of Applicant:** [Click here to enter text.](#)

**Signature of Applicant:** [Click here to enter text.](#)

**Date:** [Click here to enter a date.](#)

### Referee

**Name:** [Click here to enter text.](#)

**Address:** [Click here to enter text.](#)

[Click here to enter text.](#)

**Phone:** [Click here to enter text.](#)

**Email:** [Click here to enter text.](#)

**Health Unit or Place of Employment:** [Click here to enter text.](#)

*To the best of my knowledge, the applicant(s) meets the eligibility criteria for the **Dave Patterson Memorial Bursary** and the applicant information provided is accurate.*

Yes No

**Signature of Nominator:** [Click here to enter text.](#)

### Supplemental Information (To be provided by Referee):

Please attach a letter of reference detailing why the nominee is deserving of this bursary. You may include recent contributions to the profession or institute.

**Please submit application form and applicable documentation to the Membership Support and Engagement Councillor at [membership@ciphi.on.ca](mailto:membership@ciphi.on.ca).**

