



Bachelor of Nursing Practice Course Grant Application

Revised: January 2023

The Grant Program assists Bachelor of Nursing (Collaborative) students with the pursuit of education in nursing. It is available to students enrolled to complete NURS 3523 Extended Practice III and/or NURS 4516 Consolidated Practicum in Newfoundland and Labrador.

Deadline: one week prior to start of course

Grant Requested: NURS 3523 _____ NURS 4516 _____

School: Western Regional School of Nursing _____ MUN School of Nursing _____ Centre for Nursing Studies _____

Practice Course Start Date: _____

Site that Practice Course will be completed: _____

Part A.

Surname: _____ Given Name: _____

Previous Name (If applicable): _____

Part B.

Social Insurance No.: _____
(Canada Revenue Agency regulations require the submission of a social insurance number in order to receive a grant.)

Date of Birth: _____ / _____ / _____
Day Month Year

Part C.

Current Address: (Cheque will be mailed to this address)	Permanent Address: (If different from current. T4 will be mailed to this address)
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(H) Telephone #: (_____) _____ - _____ (C) Telephone #: (_____) _____ - _____

Email: _____

Declaration by Student:

- I hereby declare that the information given on this release is true and correct to the best of my knowledge;
- I authorize the Government of Newfoundland and Labrador and the Regional Health Authorities to collect and share information about me, as necessary, from any level of government in Canada, education institutions, and/or any other party identified in this application, for the purpose of verifying my eligibility for financial assistance and for verifying my compliance with the terms and conditions of receiving said financial assistance.
- The appropriate T4A will be issued for funds disbursed in each calendar year.
- I will update any changes in contact information to the Department of Health and Community Services
- I have read the Bachelor of Nursing Practice Course Grant Policy and agree to be in compliance with such policy.

Date

Signature of Student

Please return the completed form via email to: HCSBursaries@gov.nl.ca