

ALBERTA COLLEGE OF PHARMACISTS

STUDENT PROFESSIONAL DEVELOPMENT GRANT - APPLICATION FORM

The Alberta College of Pharmacists respects the privacy of all individuals. The personal information collected on this form is being collected to determine suitability for a grant or scholarship. All personal information collected on this form will be managed in accordance with our privacy of personal information policy which can be viewed on the college website at **pharmacists.ab.ca**. Any questions or concerns may be directed to our privacy lead at (780) 990.0321 or privacyinfo@pharmacists.ab.ca.

SURNAME: _____ GIVEN NAME: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

PHONE: _____ E-Mail: _____

APPLICATION TIMEFRAMES:

Annually, applications must be received prior to November 15. Successful candidates will be notified prior to December 31 of their application year. Awards may be used to support the developmental opportunity outlined in the application, anytime during the next calendar year.

Successful candidates will receive funds, upon confirmation of initiating project, or registration in professional development opportunity, as the case may be.

Describe your participation in and support of professionally related groups or activities (up to 200 words).

Describe how you plan to use the grant (up to 200 words).

Describe how this opportunity will either:

- Advance your profession; or,
- Enhance your leadership skills or ability to perform “professionally” (up to 400 words).

Have you applied for other funding for this activity?

Yes

No

If yes, what were the results of your funding requests?

Have you received any other financial support from the Alberta College of Pharmacists?

Yes

No

If yes, please provide details.

Date: _____ Signature: _____

Reference:

Please provide a letter from a current instructor in your program, outlining why the college might support your application over others?

Application Submissions:

Submit your completed application by email to:

communications@pharmacists.ab.ca (include *ACP Student Grant Application* in the subject line)

or by mail to:

Greg Eberhart
Registrar
Alberta College of Pharmacists
1100-8215 – 112 Street
Edmonton, AB T6G 2C8