

**The Division of EMS  
Paramedic Postgraduate Education Bursary  
Application**

**\*\*Incomplete applications will not be reviewed\*\***

<b>Department:</b> Emergency Medicine, Division of EMS	<i>Shaded areas for administrative purposes</i> <b>Account Number:</b>
<b>Name:</b>	<b>Position and Employer: (if applicable)</b>
<b>Address:</b>	<b>Phone Number:</b>
<b>Student Number:</b>	<b>Email:</b>
<b>Course/Program Name:</b>	<b>Institution Name:</b>
<b>Length of Course/Program:</b>	<b>Start Date:</b>
<b>Description of Course/Program:</b>	
<b>Amount applying for:</b> (Max \$3,000 each year)	\$
<b>Tuition:</b>	\$
<b>Applicant Signature:</b>	<b>Date:</b>
<b>Approved by:</b>	<b>Date:</b>

## **APPLICANT SUBMISSION CHECKLIST:**

- Application form (this form)**
- Cover letter**
- Current C.V.**
- Letter of acceptance\***
- Requested two (2) letters of recommendation\***  
(sealed or to be sent directly to the Division of EMS)
- Requested official undergraduate transcript(s)\***  
(sealed or to be sent directly to the Division of EMS)

**\*see application information sheet for more details and requirements**