

604-946-1121 Loc 783212

### STUDENT BURSARY

### **INTRODUCTION**

Delta Hospital Auxiliary was begun in 1969, and is a major volunteer service provider and fundraising organization supporting Delta Hospital. In appreciation for the public support that we have received over the years the Auxiliary now awards six bursaries of \$1,500.00 each. Funds are awarded at the discretion of the Auxiliary Bursary Committee.

#### **ELIGIBILITY.**

Applicants must be involved in or entering the field of Health Care
Applicant must be a current Delta resident for a period not less than two years
Successful candidate must furnish proof or registration, along with Social Insurance Number, to accounting@dhas.ca from an approved institution by September 15 or forfeit the award.

### **DOCUMENTATION REQUIRED**

Proof of two years residency in Delta
Photocopy of most recent academic records
Two recent letters of reference (school, employment, volunteering)
Proof of validation for volunteer hours
Personal letter detailing financial need for the Bursary, career area chosen, reason for pursuing this career and services made to this community

#### **SUBMISSION**

Please complete and submit the application form (page 2) with all documentation. Incomplete applications will not be considered. Faxes and emails will not be accepted.

#### **CLOSING DATE**

**May 1** annually. The successful applicant will be advised by **June 15**<sup>th</sup>. For more information please contact dh.auxiliary@fraserhealth.ca, or call 604-946-1121 L 783212

# **DELTA HOSPITAL AUXILIARY SOCIETY**

## **STUDENT BURSARY**

Date of Application

## **APPLICATION FORM**

| То:   |  |
|---|--|
| Bursary Committee, Delta Hospital Auxiliar  | y Office, 5800 Mountain View Blvd., Delta. V4K 3V6 |
|   |  |
| Name:   |  |
| Address:  |  |
|   | D 1 10 1   |
| City:   | Postal Code:                                       |
| Home Phone:   | Cell Phone:  |
| Email:  |  |
| Currently Attending:  |  |
| Planning to Attend:   |  |
|   |  |
| Documents to be submitted:  |  |
| ☐ Proof of two years residency in Delta   |  |
| <ul><li>Photocopy of most recent academic records</li><li>First recent letter of reference (school, employment, volunteering)</li></ul>                     |  |
| ☐ Second recent letter of reference (school, employment, volunteering)  |  |
| <ul><li>Proof of validation for volunteer hours.</li><li>Personal letter detailing financial need for the Bursary, career area chosen, reason for</li></ul> |  |
| pursuing this career and services m   | ade to this community.                             |
|   |  |
| Applicant's Signature   |  |
| Applicant's Signature   |  |
|   |  |