



Canadian Association of
Hepatology Nurses

Association Canadienne
Des Infirmieres D'HepatoLOGIE

Canadian Association of Hepatology Nurses Bursary Guidelines **BCIT – NSOH 7700 Viral Hepatitis**

The CAHN Bursary is available to provide limited funding to nurses who are CAHN members and are undertaking the British Columbia Institute of Technology Hepatitis C Program. Nurses will be eligible for a minimum of \$ 250.00. Names of the successful recipients will also be posted in the CAHN Newsletter.

The Bursary is available to Registered Nurses who are CAHN members in good standing for the last two years. The Bursary is used to financially assist those who are interested in increasing their knowledge, skill and judgment to enhance quality of care through the professional development program offered at the British Columbia Institute of Technology Viral Hepatitis Course.

Applicants for this Bursary must:

1. Be CAHN members in good standing for the last two years.
2. Submit the completed application by March 14, 2015
3. All applications must include receipt of payment and proof of successful completion (any year) from the British Columbia Institute of Technology Hepatitis C Program certificate to prove completion (any year).
4. Only completed applications will be considered for the bursary. A complete application MUST include current mailing address and a short paragraph on how the course will be applied to your work setting.

Applications are reviewed and are selected on the basis of the above criteria. Successful applicants will be notified and will receive the bursary by mail.

Please send your completed application to:

Michelle Crosby

Box 133 - 714 Cedar Drive

Quathiaski Cove, BC, V0P 1N0

Email: Michelle.Crosby@viha.ca



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Bursary Application Form

Name: _____

Street Address: _____ Apt # _____

Postal Code _____ City _____ Province:

Telephone: (W) _____ (H) _____

Email address: _____

Please describe how you apply your course to your work area?

I verify this information is accurate to the best of my knowledge. If this information changes or is determined to be inaccurate I understand I will be ineligible for funding from the CAHN Bursary or may be asked to reimburse funds received for educational opportunities which were not pursued.

Applicant Signature: _____

Date: _____

Deadline: February 27th, 2017.

REMINDER: I have included:

___ receipt for the program

___ certificate of completion