



**April 2010-March 2011
Bursary Program for Difficult to Fill Health Professional Positions
Application Form**

The NLHBA will provide funding to enable Regional Health Authorities to provide bursaries to those who agree to a service agreement to work in difficult-to-fill positions. Difficult-to-fill positions are generally those in which repeated recruitment activity is unsuccessful in attracting qualified and available candidates, or this has been demonstrated by past experience. Please refer to the difficult to fill guidelines for more details. **This form is to be completed by the RHA.**

DEADLINE: January 31st or 3 months before Graduation, whichever occurs first

Health Professional: _____

(Please indicate occupation)

Graduation date: _____

____/____/____
Day Month Year

(Please provide proof of enrollment)

PART A: PERSONAL INFORMATION (PLEASE PRINT)

1. Surname: _____ Given Name: _____ Initial: ____
Previous Name (If applicable): _____

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

Date of Birth: _____
Day Month Year

3. Current Address: (Cheque will be mailed to this address unless indicated otherwise)

Permanent Address: (If different from above)

(H) Telephone #:(____) _____ - _____ (W) Telephone # : (____) _____ - _____

Cell Phone #: (____) _____ - _____ Email: _____

PART B: TO BE COMPLETED BY RHA

1. Have you previously submitted an application for funding for this position?
Yes _____ No _____

If no, please attach Application for Funding. If yes, enter date submitted. _____

2. Is this person currently employed or been employed in the past three months with any RHA?
Yes _____ No _____