



UNIVERSITY
of Prince Edward
ISLAND

SCHOLARSHIPS AND AWARDS COMMITTEE
REGISTRAR'S OFFICE

550 University Avenue, Charlottetown PE C1A 4P3
Telephone: (902) 566-0358 Fax: (902) 566-0795

The PEI School of Nursing Trust: Sister Mary Gabriel Master of Nursing Awards

DESCRIPTION

These awards were established through an amendment to the agreement between the PEI School of Nursing upon its discontinuation of operation, the Hospital and Health Services Commission, the Prince County Hospital, and the University of Prince Edward. That agreement was made based on the desire to provide lasting recognition to the contribution of the PEI School of Nursing to the development of the profession in Prince Edward Island and to promote educational opportunity for Island students at the UPEI School of Nursing.

In March 2011, the Trustees of the PEI School of Nursing Trust Fund approved changes to the dissemination of the fund to include a fund specifically in support of Master of Nursing awards at UPEI.

CRITERIA

Awarded to two students in the UPEI Master of Nursing Program; applicants must show proof of enrolment in their Master of Nursing, and show a demonstrated need for financial assistance in order to pursue their degree program. Preference will be given to entrance students.

APPLICATION PROCESS (Deadline: October 15)

Application materials should be submitted to:

University of Prince Edward Island
Scholarships and Awards Committee
550 University Avenue
Charlottetown, PE C1A 4P3

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 31(c) of the PEI Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of scholarship adjudication and contacting successful award recipients. Direct any questions about this collection to: UPEI Scholarships and Awards Office, 550 University Avenue Charlottetown, PE C1A 4P3, 902-620-5187 – scholarships@upei.ca



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APPLICATION FORM

Name: _____

Home Address: _____

UPEI Student ID: _____ Telephone: _____

UPEI Email Address: _____

Please include the following in your application package:

- Application Form** (Deadline – October 15)
- Proof of enrolment in the UPEI Master of Nursing Program**
- Financial Need Form: Graduate Students** (find at www.upei.ca/scholarships)
- Personal Statement**
 - Please include in your personal statement an outline of your professional and related experience, and educational and career goals; as well as your need for financial assistance in order to pursue your degree

Signature: _____ **Date:** _____

Note: Incomplete application packages will not be considered. For official communication purposes, the Scholarships and Awards Committee will contact successful recipients through their UPEI Email Address. It is the student's responsibility to check their UPEI email account.

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