

Student professional development grant application

Applicant information

Surname

Given name

Address

City

Province

Postal code

Phone

Email

Application timeline

Annually, applications must be received prior to November 15. Successful candidates will be notified prior to December 31 of their application year. Awards may be used to support the developmental opportunity outlined in the application, anytime during the next calendar year.

Application details

Describe your participation in and support of professionally related groups or activities (up to 250 words).

Amount being requested \$ _____

Describe your goals in becoming a pharmacist or pharmacy technician, and explain how this opportunity will support you in your path to realizing your goals?

Have you applied for other funding for this activity?

Yes No

If yes, what were the results of your funding requests?

Have you received any other financial support from the college?

Yes No

If yes, please provide details.

Signature

Date

Reference

Please provide a letter from a current instructor in your program, outlining why the college might support your application over others.

Application submission

Submit your completed application by email to executiveassistant@abpharmacy.ca. Please use "ACP Student Grant Application" in the subject line.