

Mack Foundation University Health Network Medical Student Bursary 2017-2018
To support the growth of medical students through academic scholarship.

Through a generous donation by the Mack Family, each year Undergraduate Medical Education at UHN offers bursaries to support medical students who were supervised by a UHN-affiliated supervisor to do research during their MD Program period and who presented their research at a conference. Up to \$2500 will be awarded to successful applicants to cover the cost of travel, hotel/accommodations, conference registration and posters. Successful applicants will be notified via e-mail and be recognized at the annual Wightman-Berris Academy Awards Ceremony in May of each year.

Criteria for the bursary are as follows:

- Research (including education scholarship) conducted with a UHN-affiliated supervisor
- Medical students must not have any other source(s) of funding
- Acceptance of an abstract (for oral presentation or poster) and presentation at a national or international conference in the previous 18 months.

Applications must include the following:

1. Completed contact information form & signed attestation that you did not have any other sources of funding for the conference (see over).
2. Copy of the submitted abstract and acceptance letter from the conference organizers.
3. Letter of support (no more than 1000 words) from your research supervisor articulating why you should receive the travel bursary.
4. Receipts* for the conference
 - a. Travel (e.g. receipt for plane or train ticket)
 - b. Conference Registration Fee
 - c. Hotel/Accommodations
 - d. Poster

*Please note – The bursary does not cover meals or other forms of travel whilst you are at the conference (e.g. taxi).

Please deliver completed applications to:

Medical Education Department, Eaton ground floor Room 001, attention to the MACK Bursary Committee or email your application to samara.gravesande@uhn.ca.

Applications are due by March 31, 2018.

Late or incomplete applications will not be considered for the award.

Applicant and Supervisor Contact Information:

Applicant Name:	MD Program Year of Training at time of presentation:
Address:	MD Program Year of Training at present:
Tel:	Supervisor Name:
Email:	Supervisor Email:

Attestation:

By signing below I hereby attest that I had no other sources of funding to attend the conference for which I am applying for funding through the Mack Foundation UHN Resident Bursary.

Signature: _____

Date: _____