## KATHLEEN PINCKNEY NURSING INTERNATIONAL EDUCATION AWARD Due Date November 30



GENERAL INFORMATION			
Name		Department	
Program		Year of Study	
International Project/Experience			
Mailing Address (while studying)		City	
Province		Postal Code	
Email			
Home Phone	Mobile	Work	
KATHLEEN PINCKNEY NURSING INTERNATIONAL EDUCATION AWARD			
	es that affect health care at home and around the w	orld.	
Please submit the following documents with this fo	rm:		
One-page summary of the International Project/Experience			
One-page summary of the perceived benefits of the project/experience in relation to the student, the Nursing Program and to Selkirk College			
One-page response to the questions listed at the bottom of this form			
One-page calendar-style draft itinerary			
One-page Excel budget (request template provided by Financial Aid)			
Do not forget to have an instructor AND your facult section below	y supervisor for your international experience sign	off on your application in the appropriate	
Amount requested: Maximum of \$1,000 or no more than half of the total	required costs of the project/experience.		
QUESTIONS TO ANSWER			
Please describe your personal motivation(s) for part	icipating in the international experience.		

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Please describe your personal aspiration(s) for the international experience and what you are most excited about learning.			
Please describe your personal financial situation and how the award will support your participation in the trip. If you are electing to share t monies with your group should you be successful (see below), you do not need to complete this question.	the award		
INTERNATIONAL EXPERIENCE REPORT			
INTERNATIONAL EXPERIENCE REPORT			
Successful applicants must submit an evaluation of the international experience to the Advancement & Communications Office (sgobin@se within one month of the completion date of the trip.  The evaluation must include:	elkirk.ca)		
<ul> <li>A 2-page story of your most profound learning moment of the international experience. Paint the scene for us: describe the setting, involved, the activity or spontaneous experience, and what specific interaction, observation or feeling led to your learning and under A 1-page summary of learning outcomes</li> </ul>			
SUPPORTING STATEMENTS & SIGNATURES			
Please comment on the merit of the student's application.			
Signature			
Supporting Statement & Signature of Faculty Supervisor for International Experience:  Please comment on the merit of the student's application and the benefit of the project to them.			
Signature			
RELEASE OF FUNDS			
If I am the successful applicant, I will receive the award monies for my personal expenses related to the international experience.			
If I am the successful applicant, I will share the award monies with my international experience cohort. I give permission to Financial Athe award monies to our collective fundraising account. In doing so, I understand that I will not receive a T4A (Statement of Pension, Retire Annuity and Other Income).			
Student Signature Date			

Please return your completed and signed application form and supporting documents to FinancialAid@selkirk.ca or the Financial Aid desk in the Administration Building on the Castlegar Campus