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| CANDIDATE IDENTIFICATION | | | |
| Last name (at birth): | First name: | | Date of birth: |
| Birth place: | Province: | | Country: |
|  | | Social Insurance Number: | |
| ADDITIONAL INFORMATION | | | |
| *JBNQA* beneficiary Yes ☐ No☐  *JBNQA* number: | | | |
| Permanent address: | | Telephone: | |
| Email address: | | | |
| I hereby declare I am officially applying for a scholarship with the Nunavik Regional Board of Health and Social Services for the year:  ☐ 2022-2023  **Status:**  ☐ Full time ($15 000 / year)  ☐ Part time ($5 000 / year)  **Teaching institution:**  **Field of study**:  **Year of study:**  ☐ First year  ☐ Second year  ☐ Third year  ☐ Fourth year  Have you applied for the same scholarship in the same years: ☐ Yes ☐ No  If so, were you accepted: ☐ Yes ☐ No  **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| SUBMISSION OF CANDIDATURES | | | |
| **Submit the following documents:**  ☐ School letter of acceptance stating the program name and student status (part time / full time)  ☐ Scan of beneficiary card (front and back)  ☐ Letter of motivation including how their field of study is beneficial to the field of health and social services in Nunavik  ☐ Scholarship application form  Send to: [scholarships.nrbhss@ssss.gouv.qc.ca](mailto:scholarships.nrbhss@ssss.gouv.qc.ca) | | | |

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| **CANDIDATE’S RESPONSIBILITIES** |
| **The candidate understands that:**  ☐ Scholarships are tax deductible as per the law; it is the scholarship recipient’s responsibility to manage the amount accordingly in order to avoid potentially paying tax on the amount.  ☐ It is the scholarship recipient’s responsibility to submit all the required documents at the application process.  ☐ In the event of more than 10 applications yearly, the NRBHSS will hold a draw.  ☐ It is the scholarship recipient’s responsibility to submit the appropriate documents needed for the payment of the scholarship.  ☐ The scholarship payment will be made in two instalments during the school year:   * First payment: recipient will provide first semester’s schedule. * Second payment: recipient will provide final transcript for the year with 80% of the courses passed.   ☐ Bonus payments will be made as follows:   * Graduation bonus: recipient will provide a copy of a letter from the teaching institution acknowledging completion of the degree. * Hiring bonus: recipient will provide a letter from the human-resources department of the hiring party confirming the hire.   ☐ 80% of all classes need to be passed in order to receive the second payment, no minimum grades are required.  ☐ In the event of dropout from the program, the recipient understands the remaining of the scholarship will not be paid.  ☐ In the event of a change in the student’s status, the recipient needs to inform the NRBHSS of the change, and the scholarship amount will be adjusted.  ☐ Applicants will need to reapply each academic year. Being accepted one year is not a guarantee of being accepted in subsequent years.  ***Please initial all statements***  **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Send to: [scholarships.nrbhss@ssss.gouv.qc.ca](mailto:scholarships.nrbhss@ssss.gouv.qc.ca)