



Veterinary Education Bursary Application

Saddle Hills County provide a Veterinary Medicine Bursary program to eligible students to promote post-secondary education in veterinary medicine and encourage rural large animal veterinary practice, as per policy [AG27 Veterinary Medicine Bursary Program](#).

Applications should be submitted no later than July 15 of the current year.

For more information, or help completing this application, contact Agricultural Services at (780) 864-3760 or ag@saddlehills.ab.ca.

STUDENT ELGIBILITY

Eligible students shall:

- Be enrolled in a recognized post-secondary veterinary medicine program;
- Complete the application form;
- Write a paragraph of at least 500 words detailing their future career plans;
- Supply two letters of reference;
- Submit all required information to Saddle Hills County by July 15th of the current year.

The Applicants shall:

- Be given priority if they primarily reside within the G5;
- Be considered for each year enrolled in a recognized post-secondary veterinary medicine program;
- Be given priority for years which require clinical rotations;
- Be given priority if specializing in large animal veterinary medicine;
- Be eligible to receive the bursary for multiple years.

CONTACT INFORMATION

Last Name: *

First Name: *

Street Address (including house, apartment or box no.): *

Town/City: *

Province: *

Postal Code: *

Country: *

Phone Number: *

Email Address: *

PRIMARY RESIDENCE

Is your primary residence the same as the address listed above? *

Yes

No

Street Address (including house, apartment or box no.): *

Town/City: *

Province: *

Postal Code: *

Country: *

PERSONAL INFORMATION

Have you lived in Alberta all your life? *

- Yes
 No

When did you move to Alberta? *

Social Insurance Number: *

Birthdate: *

EDUCATIONAL INFORMATION

Name of Post-Secondary Institution: *

Town/City: *

Recognized Veterinary Medicine or Veterinary Technologist Program Enrolled in: *

Area of Specialization: *

Student Identification Number: *

What year of your program are you entering? *

Length of program (in years): *

What date will you be starting school this upcoming year? *

What date will you be finishing school this upcoming year? *

What is your anticipated graduation date? *

When will you be available to start work? *

Grade Point Average (GPA): *

Please upload a copy of your latest transcript *

Have you previously been enrolled in other post-secondary education? *

Yes

No

Please provide the name of each institution, the program enrolled in, the degree, and the years completed *

Please write a paragraph of at least 500 words detailing your future career plans *

Please sign in the box below *

Notice of Collection

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. Direct any questions about this collection to: FOIP Coordinator, Saddle Hills County, RR 1, Spirit River, Alberta, Canada, T0H 3G0, 1-888-864-3760.

Please send me a pdf copy of this form

- Yes
- No

Email address for copy of form *