E. V. Booth Scholarship Award

The E. V. Booth Scholarship Award was established in 1999 in honour of CSMLS Executive Director, Valerie Booth, upon the occasion of her retirement after a distinguished career in medical laboratory science. This fund was established to assist CSMLS members in fulfilling their vision of achieving university-level education in medical laboratory sciences. The fund is supported through donations from members, friends and corporations who wish to see the goals of this scholarship fund achieved.

You could receive up to a $1000 scholarship award from the Canadian Society for Medical Laboratory Science through the E. V. Booth Scholarship Award program. We are searching for a certified medical laboratory technologist who is enrolled in studies leading to a degree in medical laboratory science (or a degree with a closely related scope of study). A Scholarship of up to a $1000 will be awarded to one student enrolled in either full time or part-time studies.

Award Guidelines

To be eligible for a scholarship, you must:

1. Must be a member in good standing with the CSMLS as a certified medical laboratory technologist.
2. Be a certified member in good standing for the last five years. A recent graduate must be a member since graduation.
3. Applicants who have received an award within the past three years will only be considered if all the awards for this year have not been granted.
4. Be a Canadian citizen or a permanent resident of Canada.
5. Complete all sections of the application, and submit with enclosures in one package.
6. Enclose official transcript(s) from your program.
7. A member may only be considered for one monetary grant, scholarship or award per year with the exception of the BD Quality Assurance Project Award.
8. Current members of the CSMLS Board of Directors and staff and their immediate families are not eligible for this award.
9. An E. V. Booth Scholarship Award may be taxable. A T4A Income Tax Slip will be issued in the year an award is paid. Please refer to Canada Revenue Agency Publication P105 – Students and Income Tax (www.cra.gc.ca). Any tax implication is the responsibility of the applicant.

The deadline for submission is May 1st.
Please note you will be contacted regarding your status via email
E. V. Booth Scholarship Award Application

CSMLS ID# _____________ SIN#________

NAME (please print)

Family Name  First Name  Middle Name

Present Address ________________________

Postal Code ____________________________

Permanent home address ________________

(if different from the above)

Telephone Number (    ) _______________

E-mail ________________

University currently enrolled in:

_______________________________

Program commenced:

Y  M  D

Ends: _______________________

Y  M  D

If you are not awarded the E. V. Booth Scholarship, your application can be considered for a Founders Fund Award. Do you wish your application to be referred for consideration under the Founders' Fund Awards?

Yes ☐  No ☐

If yes, please ensure that you include information regarding the tuition fees for each of your courses.

Academic Qualifications:
List all post-secondary education in the chart below.

<table>
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<tr>
<th>College/University</th>
<th>Dates attended</th>
<th>Type of degree, diploma or certificate awarded (if any)</th>
<th>Completed education (Semester hours)</th>
<th>Grade or GPA</th>
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Please attach a separate page if needed.
E. V. Booth Scholarship Application

CSMLS ID# ___________________

Please attach a typed description of the following elements pertaining to your background:

List awards or honours that you have received.

Tell us about your leadership abilities as demonstrated through involvement in school, college or community activities.

Describe your professional goals. List any additional information for consideration by the selection committee. Please limit this information to 500 words (two double-spaced pages) or less.

Additional Information: Please ensure that you include information regarding the tuition fees for each of your courses on this form, along with a calendar description.

Please provide any additional information which will assist the committee in their decision.

Application will not be reviewed without signatures.

Applicants Declaration

I am a Canadian citizen or a permanent resident of Canada and certify that the information given in this application is true to the best of my knowledge.

Signature of Applicant ______________________________ Date: ____________________________

Y M D

Mailing Instructions

Stop and double-check!
Did you enclose the following items in ONE envelope?
☐ Signed application.
☐ Official transcript(s).
☐ Information regarding the tuition fees for each of your courses on this form, along with a calendar description.

Incomplete application packets are not reviewed.

Mail to:
Grants, Scholarships & Awards Committee
33 Wellington Street North
Hamilton, Ontario L8R 1M7

Or email:
awards@csmls.org