

**St. Joseph's Healthcare Education Fund  
Application 2010-2011**

LAST NAME		FIRST NAME	
HOME ADDRESS			
CITY	PROV	POSTAL CODE	
HOME PHONE (            )			
DEPARTMENT/UNIT		EXT	EMP. ID#
E-mail			

Position
Start Date at St. Joseph's Healthcare ( <b>Year/Month</b> )

Indicate your planned course(s) of study and cost of tuition.

COURSE NAME(S)	INSTITUTION	START DATE D/M/Y	FINISH DATE D/M/Y	COST

**TOTAL AMOUNT REQUESTED** \_\_\_\_\_

1. Have you received grants from this fund previously? YES \_\_\_ NO \_\_\_ if yes, state month/ yr \_\_\_\_\_
2. Have you applied for other funds/grants for this education? YES \_\_\_ NO \_\_\_

Describe the relevance of your planned course(s) to your career goals. Is this for a degree or certification?
<b>PLEASE ATTACH A PHOTOCOPY OF COURSE CONTENT AND TUITION COST TO THIS APPLICATION. <u>DUE TO THE VOLUME OF REQUESTS, ONLY COMPLETED APPLICATIONS WILL BE CONSIDERED</u></b>

<b>ADMINISTRATIVE USE ONLY</b>	
Approval Signature: _____	Funding from: Foundation <input type="checkbox"/> Sisters <input type="checkbox"/>

St. Joseph's Healthcare Foundation and the St. Joseph's Health System are proud to award funds to St. Joseph's Healthcare employees, in keeping with our mission to provide education opportunities for staff so that they may enhance their knowledge and skills.

**Criteria for Applicants ONLY COMPLETE APPLICATIONS WILL BE CONSIDERED**

- Deadlines for **complete** applications are:
- March 1<sup>st</sup> for courses starting April-August
  - August 15<sup>th</sup> for courses starting September-December
  - November 15<sup>th</sup> for courses starting January-March

1. Minimum employment of 6 months at St. Joseph's Healthcare Hamilton.
2. Courses must be taken at a recognized educational institution, high school, community college, and university or other approved institutions for continuing education.
3. Education content must be applicable to St. Joseph's Healthcare, and authorized by hospital department Manager/Director.
4. Staff is eligible for a *maximum* total of \$1,000 in grants per fiscal year (April 1 to March 31). Award amounts subject to funding availability.
5. Any applications arriving to the Foundation after the deadline date will be returned to the applicant, and can be re-submitted for approval at the next application period.

**CHECKLIST FOR SUCCESS:**

- Complete information entered legibly, on Page One of application
- Course Content – a print-out of course outline, describing topics covered in course
- Tuition Costs—from the institution. If current costs are not available, submit tuition costs from last year.
- Applicant's signature, and dated
- Hospital Manager's/Director's Signature (or acting Manager, if your Manager is not available by the deadline date), and dated
- Keep a copy of all the submitted documents for your own records.

**Upon approval, reimbursement will be processed once Foundation receives:**

- Receipt or proof of payment from institution
- Proof of completion of course from institution

Proof of payment and course completion can be submitted along with the application by the deadline date, or at a later date- once you have them. Once received, cheque requests will be sent to payroll for processing. **\*See Note**

**Submit applications, receipts and proof of completion to the attention of Susie Vyles (extension 36036) at: St. Joseph's Healthcare Foundation 224 James St. S. Hamilton, ON L8P 3A9 Hours: 8:30–4:30 Mon–Fri. Documents can be submitted either in person, by mail, inter-office mail or faxed to (905).577-0860.**

\_\_\_\_\_  
Applicant Signature / Date

\_\_\_\_\_  
Hospital Manager/Director / Date

(Please print full name clearly)

**\*Note: For Foundation reimbursement**, the Payroll Department processes your award amount on a line separate from your income amount. You should see an amount listed as "education award" on your pay stub. Please be advised that these awards are considered taxable by your employer and any tuition tax receipts received by the educational institution will be applied against this tax and therefore reimbursed when filing your return.

**For questions concerning criteria for application, review process, or other education funding opportunities, call Sharon MacQueen, Director of Employee & Organizational Development at ext. 36283**