



## Pharmacy Leadership Awards

Passion. Integrity. Leadership

*In memory of Barbara Wells*

### APPLICATION FORM

**Note:** To be considered for a grant by the Wellspring Committee, all sections of the Application must be completed fully and emailed to [submissions@cfpnet.ca](mailto:submissions@cfpnet.ca). **The deadline is Monday, May 8, 2023.**

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#### 1. Applicant Information

Name: First: \_\_\_\_\_ Initial: \_\_\_\_\_ Last: \_\_\_\_\_

**Mailing Address** (complete with postal code) for all correspondence regarding this application:

\_\_\_\_\_

Telephone Work: \_\_\_\_\_ Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

2. Province of Licensure or Registration: \_\_\_\_\_

3. Intended Purpose for the funding (descriptive phrase only, details in Q.7):

\_\_\_\_\_

4. Amount Requested: \$ \_\_\_\_\_

5. Justification of Funds Requested:

Please itemize allocation of the funds requested (such as materials, travel expenses, registrations, etc):

Expense Item	Purpose	Funds Required
		\$
		\$
		\$
		\$
	<b>Total (should equal total funds requested)</b>	\$

If funding is being obtained from multiple sources, please indicate where funding from the Wellspring Pharmacy Leadership Award will be utilized.

## 6. Application Focus

- a) Please provide a brief description to clearly demonstrate the relevance of this submission in meeting the objectives of the Wellspring Pharmacy Leadership Award.

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- b) Describe your expectations of learning from the proposed initiative \_\_\_\_\_

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- c) How will this initiative expand your contribution to the profession of Pharmacy \_\_\_\_\_

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- d) How will the learning and experiences gained through this initiative be shared \_\_\_\_\_

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## 7. Attachments

- Detailed description of the proposal (six double-spaced typed pages or less)
  - title page, including an executive summary (no longer than 1 page)
  - introduction which includes objective(s), rationale and anticipated significance of initiative
  - a proposed work plan which describes the activities and target completion date of the initiative
- Curriculum vitae of the applicant which includes the following:
  - education
  - professional experience (for the past five years)
  - professional affiliations
- Other pertinent information, such as video, photographs, information leaflets, etc
- Letter of recommendation from supervisor/colleague for both the applicant and the learning experience

8. Please list all other amounts and sources of support that you have received and/or are currently applying for to fund this initiative.

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9. Date of submission of application: \_\_\_\_\_

## 10. Acknowledgement and Acceptance

It is understood and agreed by the undersigned that any award received as a result of this application is subject to the following terms:

- funds granted as a result of this request are to be expended for the initiative as described in this application
- the statements contained in this application are true and complete to the best of your knowledge
- applicants must advise of potential conflict of interest upon submission of the proposal.
- applications must be emailed to [submissions@cfpnet.ca](mailto:submissions@cfpnet.ca) by Monday, May 8<sup>th</sup>.

Signature of Applicant: \_\_\_\_\_