



McGill

Dialogue McGill

HEALTH AND SOCIAL SERVICES
COMMUNITY NETWORK BURSARY PROGRAM
2023-2024 ACADEMIC YEAR

FORM 3: COMMUNITY NETWORK RECOMMENDATION

NOTE: PLEASE DOWNLOAD THIS FORM, OPEN IT AND FILL IT OUT ON YOUR COMPUTER WITH ADOBE READER XI OR HIGHER. YOU CAN GET A FREE COPY OF ADOBE READER FROM THE [ADOBE WEBSITE](https://www.adobe.com/reader). IT IS AVAILABLE FOR WINDOWS, MAC AND ANDROID DEVICES.

IMPORTANT DATES FOR BURSARY APPLICATIONS		
Deadline for students to submit application forms to community networks May 24, 2023	Deadline for community networks to submit application to Dialogue McGill June 14, 2023	Decisions rendered by Dialogue McGill July 13, 2023

APPLICATION FOR:

Bursary Type

SPONSORED BY:

Name of Community Network

FOR:

Name of Student

PURSUING STUDIES AT:

Name of Educational Institution

PROGRAM OF STUDY:

Name of Program

SUBMITTED ON:

(yyyy/mm/dd)

Dialogue McGill funded this program thanks to a financial contribution by Health Canada.

Ce document est disponible aussi en français : www.mcgill.ca/dialoguemcgill/fr/forms

TO BE COMPLETED BY THE CONTACT PERSON AT THE COMMUNITY NETWORK

The community network must submit this signed and dated form to Dialogue McGill. Please add the student's name in the header.

Section 1: Program Applicant

Student's name: _____ Region: _____

Priority Ranking: ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6thHas this student been awarded a Dialogue McGill Community Network Bursary before? ☐ Yes ☐ NoIf **yes**, which year(s): _____

If the student has been awarded 3 times or more, please specify the reason for recommending them:

Section 2: Community Network Contact Person

Name of community network: _____

Name of contact person: _____ E-mail address: _____

Section 3: Description of Bursary Program Promotional Activity**How did you promote the Bursary Program call for applications?** ☐ CISSS / CIUSSS ☐ Community center☐ Community network ☐ Educational institution ☐ E-mail ☐ Family ☐ Friend ☐ Internet☐ Dialogue McGill website ☐ Newspaper ☐ Social Media ☐ Television ☐ Other

If other, please specify: _____

Section 4: Priority Service Areas

Have certain priority areas been identified for your region by the MSSS or the CISSS/CIUSSS?

If so, what are they?

Priority Service Areas	Information Source(s)
1.	
2.	
3.	
4.	
5.	
6.	

Have priority service areas been identified that are specific to the English-speaking population?

If so, what are they?

Priority Service Areas	Information Source(s)
1.	
2.	
3.	
4.	
5.	
6.	

Is the applicant studying in a field that can potentially address any of the above listed priority service areas?

☐ Yes ☐ No

If no, please explain why you are recommending the candidate.

Section 5: Recommendation

Why are you recommending this particular student for the Bursary Program? (Maximum 200 words)

Section 6: Checklist of Supporting Documents

Student Application

Community Reference 1

Community Reference 2

Section 7: Community Network Declaration

I declare that:

- the information provided in this application is accurate and complete;
- this application is sponsored by the COMMUNITY NETWORK named in Section 2 of this form;
- this application was submitted to the Bursary Selection Committee and was chosen by the members to be forwarded to Dialogue McGill for approval;
- said COMMUNITY NETWORK is responsible, if the Bursary Program application is approved, for receiving an allocation from the McGill Project and distributing bursary payments to the Bursary Program Recipient;
- said COMMUNITY NETWORK commits, if the Bursary Program application is approved, to conforming to the Payment Modalities listed on Page 10 of the Bursary Guide and to the Community Networks Responsibilities listed on Page 23.
- said COMMUNITY NETWORK commits, if the Bursary Program application is approved, to ensuring a Community Network/ Bursary Recipient contract is signed with the recipient outlining obligations pre and post-graduation as well as default procedures;
- said COMMUNITY NETWORK agrees, given approval of the Bursary Program application and financial assistance, to monitor the recipient's file and his/her adherence to commitments outlined in the Recipient Responsibilities and in the Community Network/Recipient contract;
- said COMMUNITY NETWORK agrees, in case of default, to inform Dialogue McGill in writing, submit a repayment plan for preapproval, sign the repayment agreement with the student and inform Dialogue McGill when the terms of the repayment plan have been met;
- said COMMUNITY NETWORK agrees, if applicable, to process reimbursements owing from the recipient in case of default;
- said COMMUNITY NETWORK agrees, given approval of the Bursary Program application and financial assistance, to supply information on relevant financial statements, as well as the necessary follow-up evaluation and reporting data;
- said COMMUNITY NETWORK agrees, given approval of the Bursary Program application and financial assistance, to keep the financial documents and other bursary-related documents on file for six years.

Name

Signature

Date (yyyy/mm/dd)

NOTE: Please print this form to PDF and then insert your e-signature, or print the form and sign by hand.

Dialogue McGill



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Santé
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