

MICHELLE HARKNESS MENTORSHIP AWARD
INAUGURAL 2018-19 COMPETITION

CATEGORY 3: MENTORSHIP DEVELOPMENT GRANT
APPLICATION FORM

1. Applicant Information

Last Name (family name)			
Given Name(s)			
Title and Institution/Organization			
Address			
Email		Telephone	
Relationship to AllerGen NCE Inc.			
Applicant's Signature			
Date			

2. Applicant Statement

Provide a one-page statement by the applicant describing his/her philosophy on mentoring, mentoring experiences and accomplishments to date, and future aspirations.

3. Proposed Use of Award Funds (up to \$5,000)

Provide a one-page detailed description of the proposed use(s) of the MHMA funding up to an amount of \$5,000.

4. Proposed Budget

In the table below, provide the budget and brief justification for the anticipated expenses associated with the use of MHMA.

Eligible Expenses	\$ Cdn	Justification
Professional development towards enhancing capacity to mentor others	\$	
Mentoring activities	\$	
Mentorship-related conferences and meetings	\$	
Mentorship-related scholarship	\$	
Other - Please specify	\$	
Total Eligible Expenses	\$	

5. List of Attachments

Provide a list of the documentation being provided to support the budgeted activities (e.g., course description, conference program, etc.)

6. Curriculum Vitae

Provide the *Curriculum Vitae* of the applicant.

