



PAHF Staff Education Grant aims to provide education development and innovative learning opportunities to Peace Arch Hospital (PAH) and Fraser Health Community employees working in the White Rock/South Surrey region. Funding is available for professional development opportunities including: conferences, seminars, and workshops (including fees, travel, accommodation, and materials). University courses including diplomas or degrees, and continuing education programs are not eligible.

Eligibility Requirements

- Must be a full or part-time PAH or Fraser Health Community employee working in the White Rock/South Surrey area
- **Applications must be submitted a minimum of 30 days prior to the educational opportunity**
- Individuals may apply once per calendar year (maximum \$3,000)
- Physicians are not eligible to receive funding

Please review the **Application Guidelines** carefully and **complete all sections and signatures**. Incomplete applications will not be considered.

Applicant Name: _____

Date: _____

Job Title: _____

Department: _____

Employment Status: Full time Part time

Amount Requested: _____

Phone Number: _____ Personal Email: _____

Fraser Health Email: _____

1. Please provide a detailed description of the proposed educational opportunity. Attach copies of the conference/workshop agenda and session information, providing a website link if applicable.

2. Date(s) of education opportunity:

3. Detailed budget: (meals, alcoholic beverages, and other incidental expenses are not covered)

4. Describe the anticipated outcomes and the impact or benefit to patient care or the community:

5. Does your department have any funds allocated to this education opportunity? If yes, how much? If not, why?

6. Will this educational opportunity benefit the elderly population at PAH? Yes No

7. **Mandatory Approval** from your direct Manager, Program Director, and PAH Executive Director:
By signing below, I verify that the applicant is a PAH or FH Community employee working in the White Rock South Surrey region, and confirm this educational opportunity is an approved activity, directly benefiting the employee in their current role.

Name: _____ Signature: _____ Position: _____ Date: _____

Name: _____ Signature: _____ Position: _____ Date: _____

Name: _____ Signature: _____ Position: _____ Date: _____

Applicant Signature: _____ **Date:** _____

By putting my name on the signature line above (hard copy or electronic), I hereby agree to abide by all decisions of the PAH Foundation, that all funding decisions are final. All application material becomes the property of PAHF for its use or release of same material for any purpose including publicity and funding agencies shared databases. Applicants who are granted funds are asked to submit a report to PAHF after the conclusion of the educational event, describing the benefits and learnings from the educational opportunity. PAHF respects your privacy. For more information on our privacy policy, visit <https://www.pahfoundation.ca/contact/accountability>.

Please submit applications to:

Amy Cross, Community Engagement Officer
Peace Arch Hospital Foundation
15521 Russell Avenue, White Rock, BC V4B 2R4

Phone: 604-535-4520
Fax: 604-541-5820
E-mail: amycross@pahfoundation.ca

FOUNDATION USE ONLY:	Received: _____	Project ID: _____
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Approved Amount: _____	Fund: _____
Signature: _____	Date: _____	Decision Notice: _____