



# Kiwanis®

THE KIWANIS FOUNDATION OF CANADA  
LA FONDATION CANADIENNE DU KIWANIS

## **Kiwanis PIP Dr. John Button Scholarship** **Bachelor of Science - Medical Degree - Nursing**

**(EG: Physician, Nursing, Medical Research, Pharmacist)**

**This is a One Year \$5,000 Canadian Scholarship**

**Completed Application must be received by March 31st each year**

Application Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

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

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Email Address: \_\_\_\_\_

**References:** Please attach the following references. **(Fully completed hard copy References are required to be attached)**

- 1) School Principal/Faculty Advisor (Hard Copy Attachment)**
- 2) Kiwanis Club Member (Hard Copy Attachment)**
- 3) Community Leader (Hard Copy Attachment)**

**School Grades:** Please provide a copy of your Education Marks (last full year plus the first semester of the current year).

**Biography:** Please attach your **Personal Biography highlighting your Kiwanis Key Club and/or Circle K Club experience or other Volunteer Experience** (include club name and years you were a member).

**University/College you are attending or planning to attend in Canada:**

**Name of Institution:** \_\_\_\_\_

**Address of Institution:** \_\_\_\_\_

**Essays:** **Please attach two Essays (1) Why you have decided to go into the Medical Science Field (2) Why should we choose you (250 words or less for each essay).**

**Mail:** Kiwanis Foundation of Canada  
P.O. Box 5034, Brantford, Ontario N3T 6J7

**E-Mail:** "office@kfcnd.org"