



### Background

Mr. G. Fred Hulme has established an endowment fund in memory of his wife Marguerite, who graduated in pharmacy from the University of Manitoba in 1940 at the university to support a scholarship to encourage young women and men to enter the profession of pharmacy. The fund is valued at \$300,000.

The scholarship, in the initial amount of \$3,000, shall be awarded annually, on application.

The College of Pharmacy will offer a commemorative medallion, which will be presented to the recipient at the annual College of Pharmacy Student Recognition event.

### Eligibility

College of Pharmacy undergraduate students.

### Submission deadline

August 2 annually

### Criteria

Applicants must meet the following criteria:

- Canadian Citizen or Permanent Resident of Canada
- Entering the first year of full-time studies (minimum 80% course load) in the College of Pharmacy
- Admission adjusted-grade-point average (AGPA) of not less than 4.0
- Participation in extracurricular activities
- Demonstrated leadership potential

The scholarship continues in the amount of \$3,000\* for each of the second, third, and fourth years of study in the College of Pharmacy at the University of Manitoba provided the recipient continues as a full-time student (minimum 80% course load), and:

- Maintains a minimum grade-point average of 3.75;
- Continues participation in student extracurricular activities; and
- Further develops leadership qualities.

In the event of a recipient not qualifying for continuation of the Scholarship, the university may select another student, meeting the qualifications, to receive the funds which would have been awarded to the initial recipient.

### Required Documents

- Completed scholarship application form
- A personal resume
- Your most recent academic transcript (unofficial)
- A letter of reference. The letter should be included with a completed application form and in its original, unopened, and sealed envelope.

Personal information		
Surname	First Name	Year of program

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### References

Please provide the name and phone number of three references who may be contacted during the selection process, including the individual who will be submitting your letter of reference.

References should be persons who know the applicant well and about their involvement in school or community activities. References cannot be related to the applicant.

#### Reference 1

Surname	First Name	Professional title
Organization	Relationship to student	Phone (work)

#### Reference 2

Surname	First Name	Professional title
Organization	Relationship to student	Phone (work)

#### Reference 3

Surname	First Name	Professional title
Organization	Relationship to student	Phone (work)

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### Activities

In order of importance to you, please list up to three school or community activities in which you have invested your time and energy, stating why each was important to you.

#### Activity 1: Your role

Hours spent (per week, month or year)

Dates

Who or what prompted your involvement?

Importance of this activity

#### Activity 2: Your role

Hours spent (per week, month or year)

Dates

Who or what prompted your involvement?

Importance of this activity



**Activity 3: Your role**

Hours spent (per week, month or year)

Dates

Who or what prompted your involvement?

Importance of this activity

**Long-Answer Questions**

Contributions - Please write a statement which describes your most significant contribution to date and its value to your school or larger community. Why was it important to you and to others? (Max. 400 words)



### Long-Answer Questions

Challenges - Describe a time you challenged yourself by taking on a task/project for which a successful outcome was uncertain. What setbacks did you encounter? How did you deal with them? (Max. 400 words)

Leadership - Describe an important initiative you undertook or an activity in which you held a leadership position. What did you learn from your successes and failures as a leader and how have you applied these lessons? (Max. 400 words)



### Signature

I certify that the information provided on this application form, and in the accompanying documentation, is true, accurate and complete. I have read the Marguerite Hulme Scholarship ("MHS") award application and in the other documents accompanying this application. I agree to be bound by all of them. Moreover, I authorize the provision of any information held or to be held by secondary schools, post-secondary institutions, community organizations and others, relating to my application, including but not limited to personal evaluations and transcripts, to the College of Pharmacy, University of Manitoba. I understand and accept that:

1. Such information, as well as the personal information contained in this application, will be used by the MHS's selection committee for the purpose of selection, and to facilitate ongoing administrative correspondence with applicants, necessary to further the objectives of the MHS and to improve the selection process
2. The College of Pharmacy at the University of Manitoba will not release application evaluations or the results of the evaluation process, except to inform me whether or not my application has been accepted
3. For all questions regarding my personal information held on file by the College of Pharmacy at the University of Manitoba, including updates thereof, I may contact the College of Pharmacy at the address contained in the application
4. Finally, if my application is selected for an award, I authorize the publication of my name, photo, school, city and province of residence on University of Manitoba publications

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

### Submission

To apply, submit this application form which includes a written statement to the College of Pharmacy at the coordinates below.

Professional Program Awards Committee c/o  
College of Pharmacy  
Apotex Centre  
750 McDermot Ave W  
University of Manitoba (Bannatyne campus)  
Winnipeg, MB R3E 0T5 Canada  
[Pharmacy.Awards@umanitoba.ca](mailto:Pharmacy.Awards@umanitoba.ca) Tel: 204-474-9306 | Fax: 204-789-3744