



## BRUCE GALLOWAY TRAINEE AWARDS APPLICATION FORM

Please send this completed form and accompanying documentation to [aross@ovariancanada.org](mailto:aross@ovariancanada.org)

FIRST NAME:	LAST NAME:	
MAILING ADDRESS: ST # AND NAME:		
CITY:	PROVINCE:	POSTAL CODE:
CURRENT UNIVERSITY:	RESIDENCY YEAR:	
NAME OF LOCAL PROGRAM DIRECTOR:		
NAME OF LOCAL GYNECOLOGIC ONCOLOGIST:		
ELECTIVE DATES:	RECEIVING UNIVERSITY:	
NAME OF RECEIVING PROGRAM DIRECTOR:		
NAME OF RECEIVING GYNECOLOGIC ONCOLOGIST:		

### Further required documentation:

1. A one-page letter written by you, describing why you have chosen to do an elective in gynecologic oncology.
2. A letter of support from the local (hometown) gynecologic oncologist.
3. A letter of support from the receiving gynecologic oncologist.
4. A photo of yourself (to be used for Ovarian Cancer Canada marketing and promotional purposes, if awarded).

### **OTHER IMPORTANT INFORMATION:**

- The funds associated with the Bruce Galloway Trainee Award are to be used to support you in your relocation for a gynecologic oncology elective (for example, travel costs, accommodation, provincial licensing fees, etc.)
- If you apply for the Bruce Galloway Award more than once in a fiscal year (April 1 - March 31), your additional application(s) will be considered at the end of the year, if there are remaining funds.
- **By completing this application, you agree to have your photo and select statements from your one-page letter used for Ovarian Cancer Canada marketing and promotional purposes.**

SIGNED ON:

SIGNATURE: