Mary Honeygold Scholarship Application Form



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This scholarship was established in memory of Mary Honeygold by her family.

Requirements

Applicants must:

- 1. Be a student in their 4th year of the Undergraduate Medical Education Program.
- 2. Meet scholarship standing as defined by the university.
- 3. Submit a bursary application form to state your financial need.
- 4. Complete this application form.
- 5. Submit all documents via email to ScholarshipsUGME@mun.ca.

Application forms must be signed and completed in full by the applicant. Incomplete or improperly prepared application forms disqualify the applicant from the competition.

Applicant Information	
Name:	Student Number:
Mailing Address:	
Email:	Phone Number:
Year of Medical School:	
Have you completed the bursary application form?	Yes No
Applicant Signature:	Date:

Please answer the following question(s) in the space provided.

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st the educational activities you were involved in at Memorial related to rural medicine.

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3.	List rural medicine-related extracurricular activities (outside of Memorial education opportunities).

Contact Us

If you have any questions or concerns regarding this application, please contact the Memorial University, Faculty of Medicine Scholarships Administrator at ScholarshipsUGME@mun.ca.