

AbbVie IBD

Scholarship Program

Brought to you by Crohn's and Colitis Canada

ABBVIE IBD SCHOLARSHIP APPLICATION FORM 2018

Full Name *

<input type="text"/>	<input type="text"/>
First Name	Last Name

Address *

<input type="text"/>	
Street Address	
<input type="text"/>	
Street Address Line 2	
<input type="text"/>	<input type="text"/>
City	State / Province
<input type="text"/>	<input type="text" value="Please Select"/>
Postal / Zip Code	Country

Home Phone Number *

<input type="text"/>	-	<input type="text"/>
Area Code		Phone Number

Cell Phone Number

<input type="text"/>	-	<input type="text"/>
Area Code		Phone Number

E-mail *

Confirm E-mail *

Gender *

- Male
- Female
- Other

Date of Birth *

- -

Month Day Year

Gastroenterologist *

IBD Nurse

Hospital or Clinic Name *

Hospital or Clinic Location *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Are you a permanent and legal resident of Canada? *

- Yes
- No

What type of degree are you pursuing? *

- Associates
- Undergraduate
- Graduate
- Certificate
- Other

What year of your program will you be entering in fall 2018? *

Is this a full time or part time program? *

- Full Time
 Part Time

What area of studies are you pursuing? *

Name of the post-secondary institution *

Address of post-secondary Institution *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Please Select ▼

Country

Campus (if not main campus)

What is your approximate tuition for the 2018/2019 school year? *

How much in scholarships and grants have you been awarded (or are expected to be awarded) for the 2018/2019 school year? *

Will you be working during the 2018/2019 school year? *

- Yes
 No

If yes, how many hours a week?

Please provide a summary (maximum 150 words) of any academic or community honours or achievements you wish to share with the selection committee:

0/150

Please provide a summary (maximum 150 words) of your involvement in the IBD community, including, but not limited to, volunteer work, social media, and/or education events:

0/150

Letters of Reference

To be completed by a mentor, teacher, school official, professional colleague or employer. Please upload two (2) one (1) page letters of recommendation that express the following:

1. The nature of the reference's relationship with the applicant; and
2. The applicant's unrelenting perseverance, appetite for life and ability to strive for sustained wellness when challenged with Crohn's disease or ulcerative colitis.

Upload 1st Letter here No file chosen

*

Upload 2nd Letter here No file chosen

Health

To be completed by a health care professional who can confirm Crohn's disease or ulcerative colitis diagnosis. Please upload a signed and completed copy of the [Proof of Diagnosis](#) form.

Upload Proof of Diagnosis form here *

No file chosen

Essay

Please provide a one (1) page (500 word max.) essay outlining how you demonstrate your academic aspiration and strive to sustain an optimal level of wellness in spite of your IBD, allowing you to excel to reach your personal and academic goals and inspiring others to do the same.

Questions to address in your essay:

- Why do you strive for academic success?
- How do you strive to sustain an optimal level of wellness?
- What are our personal and academic goals?
- How you inspire others through community and school involvement?
- How you would benefit from the scholarship financially and psychologically?

Upload essay here * No file chosen**Applicant consent**

Please upload a signed copy of the [Applicant Consent](#) form. Please note that the Applicant Consent form must be signed by a parent or legal guardian if applicant is less than 18 years of age at the time of application submission.

Upload your signed Application Consent form here * No file chosen**Would you be interested in participating in any of the following opportunities?**

- Youth Webinars and/or educational events/symposiums
- Sharing stories and ideas through IBD focused blogs or web forums
- Volunteering at local Crohn's and Colitis Canada fundraising events, such as Charity Galas and the annual Gutsy Walk

How did you learn about the AbbVie IBD Scholarship Program? Please select all that apply

- Physician or nurse's office
- Crohn's and Colitis Canada
- Media
- Internet Search
- Scholarship Canada/Student Awards/Disability Awards website
- Supporting Organizations
- Educational Institution, guidance counselors, registrar's office or school media
-

From time to time, AbbVie may wish to contact selected applicants for educational and/or awareness purposes. Do you give permission for Crohn's and Colitis Canada to share your contact information with AbbVie? *

- Yes
- No

Please be sure to submit your application ONLINE by **5 pm EDT June 1, 2018**. Applications submitted after this date will not be considered.

Submit