



Western HealthSciences

2019-20 FACULTY OF HEALTH SCIENCES STUDY ABROAD SUPPORT FUND - SUPPLEMENTARY

Award Description:

The *Faculty of Health Sciences Study Abroad Support Fund - Supplementary* is intended to assist with financial losses incurred resulting from the cancellation or postponement of previously confirmed internationally-based academic study and/or practice education placements due to the COVID-19 pandemic. The intent of the fund is to support students who will be unable to receive reimbursement for payments already made to third parties for transportation, accommodation and/or management of these international educational experiences.

Value of Award:

- Dependent upon costs incurred, available funding and the number of eligible applicants

Eligibility:

- Full-time students registered in the Faculty of Health Sciences
- International student experiences must be recognized and approved at the School/Program level
- The student experience must be part of an academic course, a research/research lab placement, or practice education placement

Process:

- Complete the *Faculty of Health Sciences Study Abroad Support Fund – Supplementary* application form
- Applications will be individually adjudicated by the FHS International Committee Chair and the appropriate School Committee member.
- Funding decisions will be announced as decisions are made.



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Personal Information *(Please Print):*

Name: _____ Student #: _____

Social Insurance (SIN) #: _____

Program/School: _____ Current Year of Registration: _____

E-mail Address: _____

Are you /have you been employed by Western? Y ___ N ___ UWO Employee # _____

Supporting Documentation:

Briefly outline below:

1. The international experience for which you are requesting funding (e.g., course number, location, placement site, etc.): _____

2. Planned start and end date of the experience:

3. Expenses incurred and paid for (include details and receipts for each):

Expense	Cost Incurred



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4. What efforts have you made to seek reimbursement (please attach related documentation, e.g., emails, text messages, forms, etc.)?

Reimbursement Request	Third-party Response	Amount Received



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5. Please list any other resources/organizations/funds (e.g., *Western Student Relief Fund*) through which you have requested financial support to recoup some of the funds lost following a cancelled/postponed internationally-based academic study and/or practice education placement.

Request submitted to:	Response	Amount Received



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6. Comments

I verify that the above is a true reflection of my expenses incurred and efforts to claim reimbursement

Signature: _____ Date: _____

Completed applications (electronic copy preferred) should be submitted to your FHS International Committee School representative:

- **CSD:** Prof. Taslim Moosa (tmoosa@uwo.ca)
- **Health Studies:** Prof. Shannon Sibbald (ssibbald@uwo.ca)
- **Kinesiology:** Prof. David Howe (david.howe@uwo.ca)
- **Nursing:** Prof. Yolanda Babenko-Mould (ybabenko@uwo.ca)
- **Occupational Therapy:** Prof. Ann Bossers (abossers@uwo.ca)
- **Physical Therapy:** Prof. Samantha Doralp (sdoralp2@uwo.ca)