

Michael Kamin Hart Scholarship Application

Introduction

This scholarship was created to honor the memory of Michael Kamin Hart, who was a vibrant, intelligent and compassionate young man who was completing his Masters degree in Biochemistry at the Michael G. DeGroote Institute for Infectious Disease Research at McMaster University. In his memory, the Michael Kamin Hart Scholarship recognizes other young people who are pursuing their studies while dealing with the effects of cancer. The scholarship supports students who are between the ages of 18 – 39 who have or have had cancer. The Scholarship will support post-secondary academic endeavors and will take into account the personal achievements and triumphs of students. The \$1,000 Michael Kamin Hart Scholarship is a one-time award for full-time students in a college or university program in Ontario, Canada. Students may be in any year of their studies provided that they are enrolled for school for the upcoming Fall semester.

Eligibility

The Michael Kamin Hart Scholarship (\$1,000 each) is open to students who:

- Diagnosed with cancer above age 18
- Be an Ontario resident enrolled in a post-secondary institution
- Enrolled in part-time or full-time studies in the 2023-2024 full academic year •

Required Documentation

- A) Please submit a letter of intent: (max 500 words)
- 1. Introduce vourself
- 2. How the scholarship will help achieve your short and long term goals
 - B) Submit note from healthcare team to confirm cancer diagnosis
 - C) Letter of acceptance from the Canadian post-secondary institution

Application Process

- Email the required documents as a pdf (preferable one pdf) to aya@uhn.ca
- Mark the subject line of the email as 'Michael Kamin Hart Scholarship Your Name'
- All applications are due not later than June 30, 2023 at 11:59pm
- All applicants will be notified by email at the end of August about the status of their application
- Scholarship cheques will be issued to the college or university once confirmation of full-time enrolment in your post-secondary program and proof of fees paid has been received by us

Deadline For Submission: June 30th, 2023



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Student's Personal Information

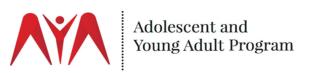
First Name:	Last Name:		Initials:	Gender:
Email Address:	I	Telephone:		I
		Home:		
		Cell	_	
Home (Permanent) Address: Unit/Apt.:				
City:	Province:	Po	Postal Code:	
Date of Birth (Month/Day/Year):				

Student's School Information

Name of College or University:		Degree Program:	Year of Study (as of Sept.):		
Proof of Enrollment: Please attach to the application					

Cancer Treatment Story

Type of cancer (please be specific):	Age at diagnosis:	Are you currently
		receiving treatment?
Hospital of treatment:	Name of Oncologist:	



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Letter of Intent (max 500 words)

1. Introduce yourself

2. How the scholarship will help achieve your short and long term goals