**W.W. and H.E. Trusdale Graduate Award in Gerontology, 2016-2017**

***D****ESCRIPTION OF* ***A****WARD*:

The W.W. and H.E. Trusdale Graduate Award in Gerontology is made possible by an endowment by Beverly Burns in memory of W.W. and H.E. Trusdale.

***V****ALUE AND* ***D****URATION*:

One award of $1000 will be awarded annually.

***E****LIGIBILITY*:

Awarded to enable students to present their research findings at a conference related to the field of aging. Confirmation of conference presentation must be provided at the time of application.

***S****ELECTION* ***P****ROCESS*:

Selection of the recipient will be made by a committee appointed by the Dean of the Faculty of Rehabilitation Medicine (home of the Alberta Centre on Aging). Selection will be based on academic merit, as indicated by grades and indices of professional development, and commitment to the field of aging.

***A****PPLICATION* ***D****EADLINE*:

Completed applications must be submitted by **4:00 pm, Monday, November 21, 2016**, to:

**Alberta Centre on Aging, University of Alberta**

**Faculty of Rehabilitation Medicine**

**3-48 Corbett Hall**

**Edmonton, Alberta T6G 2G4**

**Attention: Angela Libutti**

Late applications will not be accepted.

***A****PPLICATION* ***P****ROCEDURE*:

A complete application will consist of three parts:

1. Completed application form, including:
   1. A brief paragraph outlining the applicant’s goals in attending a gerontology conference;
   2. Confirmation of acceptance of a paper/poster presentation at a specific conference.
2. One copy of the applicant’s curriculum vitae/resume.
3. One set of official university transcripts.

**W.W. and H.E. Trusdale Graduate Award in Gerontology**

**application Form 2016-2017**

**Please Print or Type**

|  |  |  |  |
| --- | --- | --- | --- |
| **Last Name:** | | | |
| **First Name:** | | | **Initial:** |
| **Home Address:** | | | |
| **City:** | **Province:** | | **Postal Code:** |
| **Phone:** | **E-mail:** | | |
| **Faculty:** | **Department:** | | |
| **Program:** | | **Year in Program:** | |
| **Supervisor:** | | | |

**Please attach the following, using 12 pt. font, 1 inch margins, and single spacing:**

1. A brief paragraph outlining the applicant’s goals in attending a gerontology conference;
2. Confirmation of acceptance of a paper/poster presentation at a specific conference.
3. One copy of the applicant’s curriculum vitae.
4. One set of official university transcripts.

**Applicant Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Office Use Only**

Date Received: Received by:

Complete: Part 1  Part 2  Part 3 