



SUNSHINE COAST BRANCH

Maggie Gulliford Memorial Education Scholarship Guidelines

The Maggie Gulliford Memorial Education Scholarship [MGMES] will be awarded to a deserving nurse who is a member of the PNAQ Inc. Sunshine Coast Branch. The scholarship funding is to assist and encourage that nurse to undertake a program of study, at an approved institute of higher learning, which will contribute to the practice of perioperative nursing.



This biennial scholarship is to honour the memory of Maggie Gulliford and has been established as an enduring tribute to the dedication and commitment of Maggie to the PNAQ Inc. Sunshine Coast branch, and to credit her enthusiasm and belief in perioperative nursing, as a profession worth nurturing.

Maggie Gulliford was a member of the PNAQ Inc. Sunshine Coast Branch who passed away suddenly in 2005. Maggie commenced work at Nambour General Hospital in 2001 as a novice perioperative nurse and joined the PNAQ in the same year. Maggie was an active member of PNAQ, serving as Secretary of the Association from 2002 - 2004 and on the seminar committee in 2003 and 2005. She was actively involved in the establishment of the PNAQ Inc. Sunshine Coast Branch scholarship process in 2002.

PROCESS AND THE APPLICATION FORM:

- MGMEs applications are taken biennially
- Applications must be lodged with the Secretary of the Sunshine Coast Branch of PNAQ Inc. by close of business every alternate 31st December [commencing 2009]
- Applications can be submitted on the application form or online via the PNAQ website www.pnaq.net.au (Sunshine Coast Branch page)
- The recipient is to be decided by the executive committee based on the criteria outlined
- The application form is to be ratified by the Secretary of the Sunshine Coast Branch of PNAQ Inc.
- The successful applicant will be notified by post/email after the February meeting the following year
- Payment of the scholarship will be made in either two (2), three (3) or four (4) equal instalments depending on the length of the approved course of study. Payments will be made upon receipt of the previous semester results and a written progress report

SELECTION CRITERIA:

Scholarship applicant must:

- Be a continuous financial member of PNAQ Inc. for more than 2 years
- Regularly attend PNAQ Inc. meetings i.e. at least 3 per year + AGM
- Have not previously received an Educational scholarship from PNAQ Inc. Sunshine Coast Branch, PNAQ Inc. or ACORN
- Demonstrate relevance of the study program to their current professional practice & to the nursing profession
- Provide proof of enrolment
- Provide receipt/s of fee payment to approved institute of higher learning

CONDITIONS:

- Study programs are to be related to perioperative practice
- MGMEs is awarded once every two (2) years
- The amount of financial assistance being granted is **\$2000.00**
- MGMEs will be limited to any individual once only
- The successful scholarship recipient is required to provide a **written progress report** with a **copy of academic results** at the completion of each semester of study. The reports must be forwarded to the branch Secretary. PNAQ Inc. Sunshine Coast Branch shall have the right to retain and to publish the reports.
- Monies will only be paid upon receipt of progress reports and results.
- The decision of the committee is final and no correspondence will be entered into.

PROGRESS REPORT GUIDELINES:

- Outline of subjects studied
- Minimum of 250-500 words (1 page)
- Typed on A4 paper
- Be suitable for publication in the PNAQ Inc. newsletter
- Be sent to the Secretary of PNAQ Inc. Sunshine Coast Branch at the completion of each semester of study

SEND COMPLETED APPLICATION FORM AND SUPPORTING DOCUMENTS TO:

**The Secretary
PNAQ Inc Sunshine Coast Branch
P.O. Box 2535
NAMBOUR WEST 4560 QLD**

OR

Email to: sunshinecoast@pnaq.net.au

OR

Submit online at www.pnaq.net.au [Sunshine Coast Branch page]



SUNSHINE COAST BRANCH

Maggie Gulliford Memorial Education Scholarship Application Form

Full Name Ms/Mrs/Miss/Mr _____

Address for Correspondence _____

Postcode _____ Email Address _____

Phone [Home] _____ [Work] _____ [Mobile] _____

PNAQ Inc. Membership Number _____ Year Joined _____

Current Employer _____

Current Position Held _____

Institution Name _____

Course Name _____

Student Status [i.e. full or part time] _____

Commencement Date of Study Program _____

Expected Completion Date of Study Program _____

Briefly describe the relevance this study program has to your current perioperative nursing practice and the benefit to the nursing profession as a whole

I agree to abide by the MGMEs guidelines and I acknowledge that failure to complete the proposed course of study will result in all monies being refunded to PNAQ Inc. Sunshine Coast Branch.

Signature _____

Date ____ / ____ / ____

