

Application Guidelines

C. Robert Kemp Palliative Care Grant

A complete application for the C. Robert Kemp Palliative Care Grant must include:

- The program title
- The site at which the program is offered
- The frequency of the educational activity
- The program's duration (start and end dates)
- Your budget table, including descriptions and values; please provide a detailed breakdown of the total anticipated cost of your participation in this program
- Whether you have access to funding from another source (e.g., provincial/continuing professional development funding, grants, faculty development awards)

In a separate document, please:

- Describe in detail your proposed educational program
- Provide a brief description of your current practice profile and the degree of your involvement in palliative and hospice care
- Describe your specific learning objectives
- Describe how your participation in this program will benefit your professional development
- Describe how your participation in this program will benefit the patients in your practice and/or community
- Describe how your participation in this program will benefit other health care professionals within your community (including other family physicians)

Please upload your complete submission as a PDF and adhere to these formatting requirements:

- Font – Arial or Times New Roman
- Font size – 12 point
- Margins – Standard one-inch margins
- Page restriction – 10 pages maximum

All sections must be completed. Submissions that exceed 10 pages will be truncated.