

Associated Medical Services, Inc.  
**HANNAH STUDENT APPLICATION FORM**

2012 COMPETITION  
DEADLINE

1 FEBRUARY 2012

Consult Application  
Guidelines before  
Completing

Applicants must be registered  
in a recognized undergraduate  
program at a Canadian  
University at the time of  
application. Medical students  
are also encouraged to apply.

Send application to

Dr. Dan Malleck  
Secretary/Treasurer  
Community Health Services  
Brock University  
St. Catharines, ON  
L2S 3A1

Ph: (905) 688-5550 x 5108  
Email: dmalleck@brocku.ca

Applicant Information		
Name: Mr. Mrs. Ms Miss		
Contact Address		
Email	Phone	FAX
Citizenship: Canadian    Permanent Resident in Canada    Other (Specify Country):		
Academic Institutional Information		
Name, Department, Address		
Degree Program and Date of Acceptance into Undergraduate Program		
Project Title		
Research Ethics Certificate Required? No    Yes    Original Certificate Attached		
Supervisor (Name, Department, Institution)		
Project Supervisor and Location (if different from above)		
Referee		
Name, Title, Affiliation		
Signatures		
Applicant		Date:
Supervisor		Date:
University (see below)		Date:
The application must be signed by the designated representative of the administering institution. In signing this application, the applicant and administering institution agree to abide by the AMS Terms and Conditions as outlined in the Guidelines.		
Contact Information for the designated representative of the University Administration		
Name		
Title		
Phone number		
Complete mailing address		