

**Pharmacist Clinical Experience Program**

The Pharmacist Experience Program provides support for a NS Branch CSHP member to spend time at a host institution under the supervision or in collaboration with a mentor in a chosen therapeutic, research or administrative area. The goal of the program is to allow the applicant to expand their clinical, research or administrative knowledge. The mentor is expected to be an expert in the area chosen by the applicant. By signing the grant application, both preceptor and applicant consent to devoting the time to achieve the objectives outlined in the proposal.

**Funding may be provided up to a total of $2000** [Advanced funding to a maximum of $1000 may be possible with submission of receipts for pre-paid components of the program (e.g., airfare)]

**Eligibility Criteria**

Current active member of NS Branch CSHP and a CSHP member for at least 2 years. Have achieved at minimum a degree of Bachelor of Science in Pharmacy and not received this award in the past 5 years.

**Limitations**

This grant is not to be used to fund attendance at a conference. This grant is not to be used to fund a rotation that is part of a degree program or residency The applicant is responsible for negotiating the host site/mentor and all expenses associated with the program (e.g., liability insurance required by the host institution, mentor honorarium, lodging, meals, etc.)

**Criteria for selection**

The NS Branch CSHP Membership Committee will review applications, in confidence, and select the recipient based on rationale and justification for the clinical experience program including the capacity for the recipient to utilize the acquired knowledge and the potential positive impact of the knowledge to their workplace.

NS Branch CSHP Membership Committee reserves the right to reject applications or declare them ineligible. The successful applicant will be notified by the Chairperson of the Membership Committee and has 1 month to accept the offer in writing/e-mail. The program must be implemented within 12 months of the acceptance. The dates of the Program should be communicated to the Chairperson of the Membership Committee as soon as they are finalized with the host institution. Successful candidates will be announced at the first General Meeting following the acceptance. In the event that the program is terminated by the recipient or mentor, it is the responsibility of the recipient to contact the Chairperson of the Membership Committee as soon as possible.

**Nova Scotia Branch**

**www.cshp-ns.com**

**Post-Program Responsibilities**

Prepare final report (500-1000 words) and submit to Membership Committee within 2 months of completion of the program

Share experience with other NS Branch members (Preferably through a formal 45 minute)

Submission of a Branch Expense Claim Form and original receipts to the Branch Treasurer

**Application Instructions**

**Submit the following to the Andrea Meade or Michelle ten Brinke via e-mail or fax on or before April 28, 2017** (Any letters/forms that require signatures may be faxed or scanned):

* Application Form Curriculum Vitae
* Cover letter of applicant (detail CSHP involvement, if applicable)
* Curriculum Vitae of Mentor
* Letter of agreement/support from applicant’s employer/supervisor/manager/director
* Letter agreeing to support program from host institution (Director of Pharmacy or equivalent)
* Other letters of support (optional)

Forward application to:

Andrea.Meade@nshealth.ca or Michelle.tenBrinke@nshealth.ca

Andrea Meade

Dartmouth General Pharmacy- Room 1711-14

325 Pleasant St, (P.O. Box 1016)

Dartmouth, NS B2Y 4G8

Phone: (902) 465-8556

Fax: (902) 465-8548 (if faxed, please confirm with email)

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