

# Health Sciences Association of Saskatchewan

**#42 - 1736 Quebec Avenue** Saskatoon, SK S7K 1V9 Phone: (306) 955-3399 Toll-Free: 1-888-565-3399 Fax: (306) 955-3396

# WARREN CHYKOWSKI MEMORIAL AWARD APPLICATION

Warren Chykowski graduated from the Northern Alberta Institute of Technology in Edmonton, Alberta, with a certificate in Respiratory Therapy. He moved back to Saskatchewan and started working in the Saskatoon Health Region as a Respiratory Therapist in July of 1990. Warren started his involvement with HSAS by serving on Executive Council representing Respiratory Therapists, Anesthesia Assistants and Perfusionists. He was elected to the office of Treasurer of HSAS from 2003-2005. He was then elected to the Board of Governors and served in that role for 6 1/2 years. Over his many years involved with HSAS he served on many committees including Chair of Essential Services during two contract negotiations, Negotiations Committee and Finance Committee. Warren was very passionate and a strong advocate for his profession and for HSAS as a whole.

The guidelines listed on the reverse of this form will be used as part of the process for the approval and acceptance of all applications; please read them carefully before filling out and submitting your application. Completed applications should be sent to the Saskatoon HSAS office.

Section I - Membe	r Information			
Name of Member:	Last	First	Initial	
Address:				
	Street/Box No.	City/Town	Postal Code	
Telephone:	Home	Work		
Date Employment Co	mmenced:		Health Care Facility:	
Employment Status: 🛛 Permanent Full-Time 🔲 Temporary Full-Time 🔲 Permanent Part-Time 🔲 Temporary Part-Time 🔲 Job Share 🔲 Casual				
Section II—Member Authorization				
I certify that the above information is true and correct. I hereby authorize the Finance Committee to validate any of the aforementioned information if required.				
Member's	Signature		Date	
Section III - Office	Use Only			
Amount awarded for this event:			Date Received:	
Comments:				
Signature of Treasure	r		Date	

# PLEASE PRINT CLEARLY

## **APPLICATION GUIDELINES**

#### Who is eligible?

- Only Members of HSAS are eligible to apply.
- In order to qualify for assistance, you must be an Active HSAS Member
- The funding is intended to be used for one (1) Respiratory Therapist to attend the Canadian Society of Respiratory Therapists Education Conference each year.
- Members cannot win in back to back years.

#### **Application Procedure:**

- Only one (1) application per member.
- Applications must be received by January 15th of each year.
- No confirmation of receipt of application will be sent.
- If the event is not attended, HSAS expects full reimbursement of the educational grant.

#### **Required Documentation:**

- Application Forms: Only an original application form or a PDF scanned copy will be accepted.
- Receipts: Originals or copies must be submitted within 60 days of the event completion. These may be submitted by mail or in person.

## NO FAXED COPIES WILL BE ACCEPTED.

### Selection Procedure:

• A lottery system will be used to select the successful applicant.

#### Award Notification:

- The successful applicant will be notified within one (1) week of the application deadline (January 15th).
- The winner will allow their name to be posted on the website www.hsas.ca and be used in any advertising campaigns.
- Unsuccessful applicants will not be contacted.

#### Administration:

- The successful applicant will be eligible for a maximum of \$500.00 which will be paid by cheque upon presentation of expense receipts. Only expenses for the following will be considered for reimbursement: registration fee, meals, accommodations, transportation and child care.
- These guidelines may be added to, changed, or amended at any time upon authorization of HSAS Executive Council.
- Application forms may be obtained from the HSAS office or website.
- The responsibility for conducting the lottery and resolving any disputes in regard to eligibility or interpretation of these guidelines rests exclusively with the Finance Committee whose decision is final and binding.

#### **Personal Information:**

HSAS will only use and disclose the personal information collected in connection with this application for the purposes of evaluating and processing the application, validating the information provided and any other purpose as required by law. For other information about privacy policies of HSAS, please see our web site, **www.hsas.ca**, or contact our office.