

Please send your donation to:



Office of University Advancement
3333 University Way
Prince George BC V2N 4Z9

Phone: 250-960-5750
Email: giving@unbc.ca
Web: unbc.ca/giving

Thank you for your gift!

The information on this form will be used to process your donation and keep you informed about UNBC. Donor names are not exchanged with other organizations. Charitable receipts are issued for donations \$5 or more.

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**Support for
Physiotherapy Students
at UNBC**

Northern Physiotherapy Bursary

People across Northern BC have long been advocating for a physiotherapy program in the North to address the need for equitable access to physiotherapy services in northern and rural communities.

About the Award

This bursary is being established at UNBC to financially support a student enrolled in the new full physiotherapy program in Prince George.

Recipients will have demonstrated financial need and satisfactory academic standing. First preference will be given to long-term residents of northern and rural British Columbia.

Recipients will be encouraged to consider a career in public practice in a northern, remote or rural community upon graduation.

Request for Support

The new physiotherapy program at UNBC is set to accept its first students in September 2020.

Let's show these students right from day one that local physiotherapists and like-minded community members are here to support their efforts.

We are looking to raise \$30,000 to create an endowed award that will support a physiotherapy student at UNBC every year in perpetuity. And Lesley and Dennis Schwab have very generously offered to match donations to this bursary up to \$15,000.

Please join us! Your gift will make a difference in the lives of these students and the patients who they will serve.

Sincerely,
Hilary Crowley, Terry Fedorkiw,
Johanna Jenkins, Elizabeth MacRitchie

Yes, I want to support students at UNBC through the Northern Physiotherapy Bursary!

\$ _____ Single Gift
 3-Year Pledge (amount per year)

Donor Name (Individual OR Company and Contact)

This is a joint gift with my spouse _____

I/we wish to be recognized as

(First and Last Name or Company Name, unless otherwise indicated)

I/we wish to remain anonymous (no public recognition)

For this gift For all gifts

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Name on Card Personal Business

Card Number Expiry Date

Signature Today's Date