SCHOOL OF HEALTH INFORMATION SCIENCE
MICHAEL MILLER SCHOLARSHIP

Application Form

UVic Student Number: __________________________________________________________

Name (Mr./Miss/Ms.): __________________________________________________________

Address: _____________________________________________________________________

Email: ______________________________________________________________________

I wish to apply for the Michael Miller Scholarship. Completion of this signed application permits the School of Health Information Science to release the attached material to the Michael Miller Scholarship Selection Committee for review.

I am a graduate student or an undergraduate student entering my 3rd or 4th year in the School of Health Information Science and I am a student in good standing.

All applicants must supply the following information:

1. Confirmation of registration as a student in the School of Health Information Science.

2. A statement of academic performance. (unofficial transcript is acceptable)

3. A short original essay on manic depression (bipolar disorder) not to exceed 2500 words which must be submitted electronically to his@uvic.ca. The essay should include an introduction/background section with reference to the literature on bipolar disorder. The body of the essay should discuss ways in which awareness of the disorder can be increased, including consideration of how health information science and applications are (or might be) applied to helping those with the disorder and making others more aware of the disorder. You should support your arguments and thoughts by citing appropriate literature.

Should I be granted the award, I agree to the release of my name, city of residence and photo for publicity purposes at the donor’s request.

__________________________
Signature

__________________________
Date