Nursing & Allied Health Bus Tour
Sept 23-25, 2022

Applications must be received by the MB Healthcare Providers Network by 4:00 P.M. on Monday, September 12, 2022. All applications are to be submitted to

cboth@sharedhealthmb.ca

Last Name: **First Name:**

Email Address:

Telephone Number: **Cell Phone:**

For the purpose of accommodations, please identify your gender:

☐ **Male** ☐ **Female** ☐ **Other:** _____

I would like to apply for: ☐ **Northern Lights**

TRAINING PROGRAM:

Nursing: ☐ **LPN** ☐ **BN** ☐ **RPN** ☐ **NP** Year of training:____
Occupational Therapy: Year of training:____
Physiotherapy: Year of training:____
Respiratory Therapy: Year of training:____
Social Work: Year of training:____
Pharmacy: Year of training:____
Pharmacy Technician Program: Year of training:____
HIM Professional: Year of training:____
Medical Lab Technologist Program: Year of training:____
Radiologic (X-ray) Technician Program: Year of training:____

I would like to self-identify as: ☐ **First Nations** ☐ **Metis** ☐ **Inuit**

Home Community: _____

What is your interest in doing an educational placement in Northern or Rural Manitoba?

What is your interest in summer employment in Northern or Rural Manitoba?

What is your interest in a career opportunity in Northern or Rural Manitoba?