



The Canadian Orthopaedic Nurses Association
Association Canadienne des Infirmières et Infirmiers en Orthopédie

CONA Orthopaedic Certification Bursary Form



Guidelines to qualify for bursaries are as follows:

- Applicant must have a current CONA membership
- Applicant must show proof of successful certification through exam or recertification process
- Applicant must include summary describing contributions to Orthopaedic Nursing
- Deadlines for application are **December 30** (fall session) and **July 31** (spring session)

Applicant Information

Full Name: _____ Date: _____
Last First Initial

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Email: _____

Phone: _____

Years in CONA: _____ CONA Chapter: _____ CONA Membership # _____

I am seeking reimbursement for: Initial certification (\$570) Certification Renewal (\$317)

Are you receiving any other financial assistance No Yes – please specify _____

Have you received funding from CONA before? No Yes – please specify _____

Local Chapter Board involvement? Please specify: _____

National Board involvement? Please specify: _____

Please e-mail this completed application and a copy of your certification certificate to:

cona.advertising@gmail.com