

The Dr. H. Patrick and Mrs. Gayle E. Cunningham Medical Scholarship

Name of Applicant		Surname		Given Name	
Home Address	Street		City	Province	Postal Code
Phone Number				Applicant Email Address	
Canadian Post-Secondary Institution (Name)				(Location)	
(Note: Proof of enrollment in a Canadian medical school is required. Please attach screen shot of student record with term dates.)					
Academic Year (Begin Date mm/dd/yyyy)				(End Date mm/dd/yyyy)	
Program Length (Years)				Year of Program Currently Entering (1st, 2nd, 3rd, 4th)	
Cover Letter (Please attach a written statement substantiating each of the criteria of the Scholarship)					
<p>If you are a successful recipient, you will be required to:</p> <ul style="list-style-type: none"> provide your school student account number for the direct deposit of funds; provide your social insurance number so that we may issue the required T4A form; and write a letter of acknowledgment to the donor 					
Applicant Signature				Date	
Parish Name:				Parish Email:	
Parish Address:				Pastor Name:	
Pastor Signature				Date	

Aqueduct Foundation wishes to acknowledge the tremendous assistance of the Catholic Diocese of Hamilton in administering this scholarship. www.aqueductfoundation.ca 1-888-723-1122

The Dr. H. Patrick and Mrs. Gayle E. Cunningham Medical Scholarship

Objective: The objective of the Scholarship is to support practicing Catholics, faithful to the teachings of the Magisterium, to practice medicine.

Donor: The Dr. H. Patrick Cunningham and Mrs. Gayle Cunningham Foundation at Aqueduct Foundation

Value of the Scholarship: \$18,000

Number of Scholarship: one per year

Eligible Students: Applicants will be practicing Catholics who 1) attend a parish in the Roman Catholic Diocese of Hamilton; 2) are enrolled in a Canadian medical school; 3) intend to practice medicine in Canada.

Terms: The Scholarship shall be awarded to an academically qualified student who has been recommended by his or her parish priest.

Application:

Applicants who meet the eligibility requirements should submit:

- 1) Completed application form.
- 2) Proof of enrollment in a Canadian medical school;
- 3) A covering letter describing what drew them to the vocation of medicine;
- 4) Most recent academic transcript.

Please send the application to: give@hamiltondiocese.com

Application Deadline: August 8, 2025

Award Date: August 15, 2025