OBJECTIVE

To attract nurses from rural and remote communities to practice in eligible underserviced areas across the province.

DEFINITION

The Ministry's Tuition Support Program for Nurses (TSPN) offers tuition reimbursement to new graduate nurses from rural and remote communities who choose to do a return-of-service (ROS) in an eligible underserviced community. The program is open to nurse practitioner, registered nurse and registered practical nurse graduates who have recently graduated as of April 1, 2007, from a Canadian University or College. Applicants must be Canadian citizens or landed immigrants, eligible to work in Ontario and must live or have gone to high school within 100kms from the community they choose to locate to.

The length of service required under the program matches the number of years tuition is reimbursed (i.e., year for year). Employment can be full-time or permanent part-time (casual employment is not eligible). For applicants who cannot find full-time employment, Return of Service (ROS) will be based on 1500 hours per year. Funds will be flowed once the applicant has started their ROS in the community they choose.

ELIGIBILITY

In order to be eligible for the Tuition Support Program, an applicant must meet all of the following requirements:

1. Be a recent (since April 1, 2007) nursing graduate of a Canadian college or university;
2. Be registered with the College of Nurses of Ontario (CNO): temporary registration does not qualify, (all applicants must apply to the program within one year following their graduation and registration with the CNO);
3. Have a permanent residence located no more than 100 kms from the underserviced community in which they wish to return service; or attended high school, for at least one full year, no more than 100 kms from the underserviced community in which they wish to locate to return service;
4. Provide proof of tuition fees paid for each academic year from nursing school attended;
5. Commit to and sign a return-of-service agreement requiring one year (minimum 1500
hours) of service in an eligible underserviced community for each year of tuition reimbursed;

6. Comply with the Return-of-Service Final Approval Process and begin return-of-service within three months of securing employment in an eligible community, and

7. Hold Canadian citizenship or landed immigrant status.

HOW TO APPLY FOR THE TUITION SUPPORT PROGRAM for NURSES

To apply for the program, the following documents are required:

1. a completed Application,
2. proof of tuition paid for each academic year grant is applied for,
3. Copy of CNO Registration Card,
4. Copy of CNO wall certificate,
5. a signed Return-of-Service Agreement indicating number of years grant applied for,
6. a signed Acceptance of Ministry Offer and Consent to Collection & Disclosure of Personal Information,
7. a blank voided cheque for the bank account in which direct bank deposits will be made,
8. a signed Confirmation of Employment (to be submitted within three months of Conditional Application Approval), and,
9. Copies of Nursing Certificate/Diploma/Degree from graduated College or University

The application must be completed and approved in writing by the Underserviced Area Program prior to commencing employment. The Return-of-Service Agreement and the Confirmation of Employment must be obtained within three months of the conditional application approval.

Applications will not be approved retroactively.

GENERAL INFORMATION

Regarding Your Eligibility

Any nurse (RN(EC), RN or RPN) who has registered with the College of Nurses of Ontario since April 1, 2007, has graduated from a Canadian university or college in the past year, and is a Canadian citizen or landed immigrant is eligible to apply to the Tuition Support Program for Nurses. For information regarding registration with the College of Nurses of Ontario please contact the following:

The College of Nurses of Ontario
101 Davenport Road
Toronto, ON M5R 3P1
Telephone: (416) 928 0900
Toll free: 1 800 387 5526
Fax: (416) 928 6507

Tuition Support Program for Nurses
Primary Health Care Team, Underserviced Area Program
March 2006
Employment Status of Nurse

A successful return-of-service applicant of the TSPN is not a civil servant, but is an employee of the hospital, facility or agency where s/he finds work.

How the program can help you locate an eligible community

Nurses interested in the program are encouraged to contact the Ministry of Health and Long-Term Care’s Underserviced Area Program, and an application package will be sent including the Tuition Support Program for Nurses Guidelines which outlines all required documents, copies of the required agreements, and a copy of the eligible communities. Applicants can also refer to the TSPN website link at:
http://www.health.gov.on.ca/english/providers/ministry/recruit/tuition/html

Lead Time Required

It takes at least four to six weeks to process an application after the applicant has provided all the necessary information. Nurses interested in the program are encouraged to provide as much lead-time as possible to ensure that everything is in order.

For more information please call (705) 564-7280, 1-866-727-9959 fax (705) 564-7493 or write to:

Ministry of Health and Long-Term Care
Primary Health Care Team
Underserviced Area Program
159 Cedar Street
4th Floor, Suite 402
Sudbury ON P3E 6A5
Questions and Answers

How does the Tuition Support Program for Nurses work?

Recent graduates from a Canadian University or College in one of the nursing programs (RN(EC)s, RNs and RPNs) who are registered with the College of Nurses of Ontario (CNO) and choose to locate to an eligible underserviced community are eligible to apply to this program. Applicants must apply to the program within one year following their registration with the CNO.

Eligibility is restricted to nurses who live or went to high school within 100kms of the eligible community they wish to locate to.

If eligible, applicants will be notified of acceptance into the program within 4-6 weeks of receipt of the application. Once approved, applicants have 3 months to find employment in an eligible community. Return-of-service must commence within 3 months of finding employment in an eligible community. Tuition reimbursement funds will be flowed to the applicant once their return-of-service begins.

Recipients must complete one year of return of service for each year of tuition paid in a nursing position that provides direct patient care in a government funded agency (e.g. hospital, long-term care facility, community nursing for CCAC clients, public health nursing). Applicants must provide services in an eligible underserviced community.

Return-of-service obligation must be confirmed on an annual basis. The recipient is required to provide proof of the number of hours they have worked (letter from their employer) confirming at least 1500 hours per year for each year of completed ROS.

All applications will be processed on a first-come-first-served basis. The tuition reimbursement is subject to personal income tax.

Who is eligible to apply?

The program is available to recent nursing graduates of Canadian colleges and universities, who are registered with the College of Nurses of Ontario, who are from a rural or remote community in Ontario and who are Canadian citizens or landed immigrants.

How does an interested candidate apply?

The Tuition Support Program for Nurses Application Form is available on the web site at http://www.gov.on.ca/MOH/english/forms/forms/uap_fm.html, or you may contact:

Ministry of Health and Long-Term Care,
Primary Health Care Team  
Underserviced Area Program  
159 Cedar Street, Suite 402,  
Sudbury, Ontario P3E 6A5  
Tel: (705) 564-7280  
1-866-727-9959  
Fax: (705) 564-7493.

Why is the Tuition Support Program available only to graduated nurses fully registered with the College of Nurses of Ontario?

Graduated nurses with full college registration are qualified to practice in Ontario, ready to start their career and are more certain of where they want to live and work.

How long does it take to process the application?

It takes at least four weeks to process an application after the applicant has provided all the necessary information. Nurses interested in the program are encouraged to provide as much lead-time as possible to ensure that everything is in order.

How will funds be paid?

All payments will be made by direct bank deposit. At the time of application, candidates will be asked to include a blank, voided cheque for the account they wish to be used for payment. Should banking information change, the candidate will need to advise the Ministry as soon as possible to ensure deposits are not delayed.

Are there any tax implications?

The funds provided through the Tuition Support Program for Nurses are subject to federal and provincial income tax.

Will the Tuition Support Program for Nurses affect eligibility for OSAP?

No. A student’s eligibility for OSAP (Ontario Student Assistance Plan) is not affected when the tuition amount is reimbursed after the final year of studies or later in graduate training.

How will the length of return-of-service be determined?

Upon successful application to the program recipients will be required to find employment in a MOHLTC funded nursing position in an eligible community on the Tuition Support Program for Nurses Eligible Community Listing.

The length of service will match the number of years tuition is reimbursed (i.e., year for year), for a minimum of one year to a maximum of four years.
Am I eligible for maternity leave?

Yes. Nurses are eligible for maternity leave benefits as outlined under the relevant Employment Insurance Programs. Maternity leave does not count against ROS obligation and the leave time will be added to the ROS required.

Which designated communities are eligible for return-of-service?

Funding for this program has been targeted to those rural and remote underserviced communities who traditionally have had the most difficulty recruiting and retaining nurses. A rurality index was used to rank the underserviced communities into groups from most rural to least rural. The eligible communities identified on the Tuition Support Program for Nurses Eligible Community Listing are the most rural or remote according to this rurality index. This list will be reviewed periodically to assess additional community eligibility.

The eligible community listing is available on the Ministry of Health and Long-Term Care’s website under the Underserviced Area Program at www.health.gov.on.ca. This list of communities will also be provided in the application package. The candidate must also currently live or have gone to high school within 100kms of the community they wish to return service.

The candidate is expected to find and confirm employment in an eligible community within 3 months of acceptance into the program and they must begin their return-of-service within three months of finding employment.

Why does the Ministry require me to currently live or have gone to high school within 100kms of the community I choose to locate to?

The funding for this program has been targeted to rural and remote underserviced communities who traditionally have had the most difficulty recruiting and retaining nurses. Choosing applicants who have a long-term link to the community will enhance the effectiveness of the program in recruiting and retaining nurses to those communities in greatest need.

Is there other help available to me to find a job in an eligible community?

To further assist you in your search for a compatible community you may also wish to contact the Community Development Officers (CDO) for southwestern, southcentral, eastern, northern, northwestern and northeastern Ontario for more information on communities looking for nurses. Contact information for each CDO is available on the Underserviced Area Program’s website at www.health.gov.on.ca:

When do I have to apply?

Tuition Support Program for Nurses
Primary Health Care Team, Underserviced Area Program
March 2006
Candidates must apply to the Tuition support Program prior to starting employment. Applications will not be approved retroactively.

New graduate nurses can apply to the program anytime up to one year after obtaining their registration with the College of Nurses of Ontario but prior to starting employment.

**When does return-of-service start?**

The term of the return-of-service will be equal to the number of years tuition was reimbursed and shall begin at a time mutually agreed upon (by the candidate and the community/employer), within three (3) months of finding and accepting employment in an eligible community.

**Can return-of-service be done on a part-time basis?**

The nursing position can be full time or permanent part time, but not casual. For positions that are not full time, return of service will be calculated on the basis of hours worked (1500 hours is equivalent to one year).

**What happens if there is more Tuition Support Program for Nurses candidates interested in a community/facility than there are practice opportunities?**

The community/facility has the right to choose the nurses it determines would best meet the needs of the community/facility.

**What happens if a candidate decides s/he would prefer to return service in another community or facility?**

Eligibility is restricted to nurses who live or went to high school within 100kms of the eligible community they choose to locate to, however, should an applicant decide they would like to locate to another eligible underserviced community or facility that meets the distance criteria, they must inform the Ministry of Health and Long-Term Care (MOHLTC) as soon as possible of their intention to leave their current employment. The ROS agreement is between you and the MOHLTC and is transferable within 3 months of termination of employment with your original employer. You may begin to work in another eligible community/facility within 3 months of leaving your original employment as long as all other criteria are met including the 100kms distance restriction.

**What are the consequences for breaching the return-of-service agreement?**

A recipient who breaches the return-of-service agreement will be required to pay back the tuition reimbursement, pro-rated to recognize completed years of service, plus interest and an administration fee. The interest rate will be equivalent to the Ontario Student Assistance Plan (currently prime +1%). An administrative fee of 10% of the original principal will also be applied.

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Tuition Support Program for Nurses
Primary Health Care Team, Underserviced Area Program
March 2006
Why is the Ministry applying an administrative fee on top of the interest rate for breaching the return-of-service contract?

Tracking participants over several years, in various locations over an extended period of time, is extremely complex and labour intensive. For this reason, an administrative fee to offset these costs for candidates who breach their return-of-service contract is applied.

How will funds be recovered if a candidate breaches his/her contract?

Should an applicant breach his/her contract, s/he will be advised in writing of the amount owed. At that time, the nurse will be provided with details where to mail a cheque in the amount owing. If the amount owing is not received within 3 months, the file will be turned over to a collection agency for collection.

Do candidates need to ensure the Ministry has current addresses and phone numbers?

It is your responsibility to keep the Ministry informed of your change of address as long as you are in the program. Please contact the Underserviced Area Program, at Tel: (705) 564-7280, 1-866-727-9959 or by fax at (705) 564-7493.
Application for Tuition Support Program for Nurses
Demande de cours gratuit pour Infirmiers/Infirmières

Please complete all sections:

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<th>Surname/Nom de famille</th>
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<th>Email/Courriel</th>
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I prefer to communicate in English [ ]  Je préfère communiquer en français [ ]

College of Nurses of Ontario (CNO) Registration Number? ________________________________
(Note: not available to temporary registrants)

Date of Registration? ________________________________

What is your immigration status in Canada?

[ ] Canadian citizen  [ ] Landed immigrant  [ ] Other (specify)

What type of program have you graduated from?

[ ] RPN  [ ] RN  [ ] BScN  [ ] RN (EC)

Name of college/university attended: Graduation Date: (MM/DD/YR)

Is your current permanent residence located no more than 100 kms from the underserviced community in which you wish to return service?

[ ] YES  [ ] NO

Did you attend high school, for at least one full year, no more than 100 kms from the underserviced community in which you wish to return service?

[ ] YES  [ ] NO

Total tuition fee for which reimbursement is requested: $ ___________________________
(Note: Tuition does not include books, student fees)

Number of years for which reimbursement is requested: ___________________________
(Note: You will be required to provide 1 year of return of service for each year of tuition reimbursed. You may apply for all or part of your nursing education)

Have you received tuition or financial support in the form of grants from any other source for this education program?

[ ] Nursing Education Initiative $ ___________
[ ] Other (specify) __________________________ $__________

Have you:

[ ] Attached proof of tuition paid (T2202 or letter from school) for each academic year assistance is applied for?
[ ] Attached a copy of CNO Registration Card?
[ ] Attached a copy of CNO Wall Certificate?
[ ] Attached copies of your Nursing Diplomas?
[ ] Attached a blank voided cheque for the bank account to which the funds will be deposited?

I hereby certify that the information is true and correct. I agree to participate in an evaluation of the program if needed.

____________________________________________  __________________________
Signature        Date

* Note that the funds provided through the Tuition Support Program for Nurses are subject to federal and provincial income tax.

Personal information contained on this document is collected by virtue of it being necessary for the proper administration of a lawfully authorised activity pursuant to Section 6 of the Ministry of Health and Long-Term Care Act, RSO 1990, Chapter M. 26, and, more specifically, for the purpose of establishing eligibility for the Tuition Support Program for Nurses.
MINISTRY OF HEALTH AND LONG-TERM CARE

TUITION SUPPORT PROGRAM FOR NURSES

RETURN-OF-SERVICE AGREEMENT

WITH

THE CROWN IN RIGHT OF THE PROVINCE OF ONTARIO, AS REPRESENTED BY THE MINISTER OF HEALTH AND LONG-TERM CARE (THE "MINISTER")

To the Minister of Health and Long-Term Care:

I, ________________________________________, agree to accept from the Minister a tuition grant under the Tuition Support Program for Nurses (the "Program"), reimbursing me for ______ years' tuition fees that I paid for my nursing education in the following program (specify which of these programs applies: registered nurse (RN); registered practical nurse (RPN); or nurse practitioner ((registered nurse, extended class) (RN (EC))): _________________________________

My tuition grant is subject to the following terms and conditions:

1. (a) (i) I will provide direct patient care nursing services on a full-time or regular part-time basis ("Services") (casual employment is not eligible), as described in clause 1(a)(ii), in an eligible underserviced community ("Community") in a provincially-funded nursing position within a hospital, facility, clinic, office or agency (each, a "Facility"), in accordance with the Confirmation of Employment. (Under the Return-of-Service Final Approval Process set out in the Conditional Application Approval for participation in the Program, I have been required to sign a Confirmation of Employment and submit it to the Minister for the Minister’s approval.)

(ii) The terms “full-time”, “part-time” and “casual” have the same meaning as those terms have under the collective agreement for Registered Nurses or Registered Practical Nurses in force in the Facility in which I will return service on the day on which I signed the Application for the Tuition Support Program for Nurses (the “applicable collective agreement”). Where there is no applicable collective agreement or where any of these terms is not defined in the applicable collective agreement, the term or terms in question will have the same meaning as under the Ontario Nurses’ Association Collective Agreement in force on the day described above.
(b) For the purpose of clause 1(a)(i), but subject to this Agreement, including the minimum requirements described in that clause, the details concerning my Services at a Facility within a Community must be determined by an agreement between me and the Facility. Subject to paragraph 2 and to the minimum requirements described in clause 1(a)(i), such agreement may be modified from time to time by the parties to the agreement.

2. (a) During the term of my approved return-of-service, I will not change my Community, Facility or Services unless,

(i) the Minister has expressly consented in advance to permit such change and has notified me of such consent; and

(ii) I submit within 90 days of the date on which the Minister expressly consented to permit such change, a new fully executed copy of the Confirmation of Employment in respect of the new Community, Facility or Services.

(b) Any change by me in breach of sub-paragraph 2(a) will be deemed to be a breach of this Agreement, in which case this Agreement will terminate without penalty, cost or liability on the part of the Minister and I will repay to the Minister all or part of the amount paid to me under this Agreement, including the administrative fee and interest, in accordance with paragraph 6.

(c) Any consent by the Minister to permit a change of my Community, Facility or Services under sub-paragraph 2(a) must be in advance and may be made subject to terms or conditions. If such agreement is given, I will return, or continue to return, service in the new Community, Facility or Services and this Agreement will apply accordingly.

3. (a) The number of years of my return-of-service will be equal to the number of years for which tuition is reimbursed (as set out above), with a minimum of one year return-of-service.

(b) Where I return service on a regular part-time basis,

(i) I will be required to provide a minimum of 1500 hours of service to fulfil the equivalent of one year return-of-service under this Agreement; and

(ii) I will be entitled to complete the minimum 1500 hours of service (for each year return-of-service) within the period of time calculated by multiplying the number of years for which tuition is reimbursed by 2; and this period of time will begin to run from the date on which I commence the provision of Services, as required under this Agreement.

Examples (for regular part-time nurses):

1. If I am paid a tuition grant for 1 year of tuition, I will be obligated to return service for 1 year – that is, a minimum of 1500 hours (1500 x 1), which I will
be entitled to complete within no more than 2 years (1 year of tuition \( \times 2 = 2 \) years) from the date on which I commence the provision of Services.

2. If I am paid a tuition grant for 4 years of tuition, I will be obligated to return service for 4 years – that is, a minimum of 6000 hours \((1500 \times 4)\), which I will entitled to complete within no more than 8 years \((4 \text{ years of tuition} \times 2 = 8 \text{ years})\) from the date on which I commence the provision of Services.

4. I will provide the Minister with confirmation that I have commenced the provision of my Services in accordance with this Agreement and the Confirmation of Employment. The Minister will pay an approved tuition grant only after I have started my return-of-service in the Community, Facility and Services approved by the Minister, and as soon as practicable after that date.

5. Where for any reason I have breached any of the terms of this Agreement, the Confirmation of Employment or the Conditional Application Approval, or the terms of my Services agreed to by me and the Facility (see sub-paragraph 1(b)), this Agreement will terminate immediately and without penalty, cost or liability on the part of the Minister, and,

(a) I will repay to the Minister the full amount of the tuition grant paid to me minus the amount representing the number of full years, if any, spent by me returning service. In this connection, return-of-service for only a portion of a year will not qualify;

Examples:

1. If I am paid a tuition grant for 4 years of tuition and return 2 full years service, I will repay 2 years’ worth of the grant.

2. If I am paid a tuition grant for 4 years of tuition and return 2.5 years of service, I will repay 2 years' worth of the grant (since the half year would not qualify).

3. If I am paid a tuition grant for 4 years of tuition and return service for half a year, I will repay the full 4 years’ worth of the grant (since the half year would not qualify).

(b) in addition to the amount of repayment set out in sub-paragraph 5(a), I will pay interest on the total amount outstanding in respect of the tuition grant.

Interest will be calculated monthly on the first day of each month at a rate equivalent to the rate applicable from time to time in the case of the Ontario Student Assistance Program (currently, prime + 1%).

(c) in addition to the amount of repayment and interest set out in sub-paragraphs 5(a) and 5(b), I will pay an administration fee of $500.00.

(d) my debt to the Ministry will arise, and interest will begin to accrue and be charged from, the date on which I received my tuition grant.
(e) I will repay the full amount owing under this paragraph 5 within 30 days following such termination.

6. Without limiting the termination rights under paragraph 5, the Minister may terminate this Agreement immediately and without penalty, cost or liability on the part of the Minister, where, in the opinion of the Minister, any other circumstance arises that prevents me from fully implementing any of the terms of this Agreement or the Confirmation of Employment, or the terms on which I received conditional approval (see Conditional Application Approval) or the terms of my Services agreed to by me and the Facility (see sub-paragraph 1(b)). For the purposes of this paragraph 6, other circumstances may include, but are not limited to, any suspension, revocation or imposition of any restrictions or other impediments, set by the College of Nurses of Ontario, on my certificate of registration.

7. Where the Minister terminates this Agreement under paragraph 6, the provisions of paragraph 5 will apply, with all necessary changes.

8. (a) Where in the opinion of the Minister I owe a debt to the Crown, the Minister may retain, by way of deduction or set-off, out of any money that is due and payable to me under this Agreement, all or part of such money as the Minister sees fit in the circumstances.

(b) In sub-paragraph 8(a), "debt" includes, but is not limited to, any money owing by me under this Agreement.

(c) Nothing in this paragraph affects any other right of the Minister or the Crown under any statute, regulation or rule of law to recover or collect money owing by me to the Crown, whether or not under this Agreement, including any right of deduction or set-off given to the Minister of Finance under the Financial Administration Act, R.S.O. 1990, c. F.12.

9. (a) I will respond fully, and as soon as practicable, to any request for information, or for a report or documentation, made by the Minister concerning the performance of my obligations, or any other matter, under or relating to this Agreement or the Confirmation of Employment.

(b) Without limiting my obligation under sub-paragraph 9(a), annually on each anniversary of the commencement of my return-of-service,

(i) I will provide the Minister with a written report confirming that I have performed all of the obligations under this Agreement and the Confirmation of Employment; and

(ii) as set out in the Confirmation of Employment, I will include with my annual report a written, signed and dated confirmation from the Chief Nursing Executive (or some other authorized representative where there is no such Officer) of the Facility in which I have returned service (as set out in the Confirmation of Employment) that in the preceding year I have provided Services on either a full-time or regular part-time basis, as the case may be, and the number of hours that I have provided such Services at the Facility in the preceding year.
10. This Agreement shall not be amended except by mutual agreement. Any such amendment shall be in writing and signed by the parties.

11. I have entered into this Agreement with the Minister only for the purposes and to the extent set forth in this Agreement. My relationship with the Minister shall, during the term of this Agreement, be that of an independent contractor. Nothing in this Agreement shall be construed to constitute me as a partner, joint venturer, employee or agent of the Minister for any purpose whatsoever.

12. If a court or other lawful authority of competent jurisdiction declares any provision of this Agreement invalid, illegal or unenforceable, this Agreement shall continue in full force and effect with respect to all other provisions. All rights and remedies under such other provisions shall survive any such declaration.

13. No waiver of any breach of this Agreement shall operate as a waiver of any similar subsequent breach or of the breach of any other provision of this Agreement. No provision of this Agreement shall be deemed to be waived and no breach excused unless such waiver or consent excusing the breach is in writing and signed by the party that is purporting to have given such waiver or consent. No delay or omission on the part of any party to this Agreement shall operate as a waiver of any such right. No waiver or failure to enforce any provision of the Agreement shall in any way affect the validity of the Agreement or any part of it.

14. Neither this Agreement, nor any of the rights or obligations of the parties arising under this Agreement, shall be transferable or assignable by any party to any third party without the prior written consent of the other parties.

15. This Agreement shall be governed by and construed in accordance with the laws of Ontario.

16. Except to the extent otherwise expressly stated in this Agreement, the rights and remedies of the parties are cumulative and are in addition to, and not in substitution for, any rights and remedies provided by law or in equity.

17. This Agreement shall operate to the benefit of and be binding upon the parties to the Agreement and their respective successors.

18. Each party shall promptly do, execute, deliver or cause to be done, executed and delivered all further acts, documents and things in connection with this Agreement that the other parties may reasonably require for the purposes of giving effect to this Agreement.

19. Any notice, consent, approval, agreement or other correspondence ("notice") given or required to be given under this Agreement by either party will be in writing and will be delivered personally or by courier, or sent by postage prepaid mail or by facsimile addressed to the other party at the address set out below or at such other address as either party later designates to the other party in writing. Notice by mail need not be by certified or registered mail.

20. All notices will be addressed as follows (include full address and facsimile
To the Minister:
Ministry of Health and Long-Term Care
Tuition Support Program for Nurses
Underserviced Area Program
159 Cedar Street, Suite 402
Sudbury ON P3E 6A5
Tel: (705) 564-7280 or 1-866-727-9959
Fax: (705) 564-7493

To the tuition grant recipient:

21. All notices will be deemed to have been received,

(a) at the time the delivery is made, where the Notice is delivered personally or by courier or sent by facsimile; and

(b) 5 days after the Notice has been deposited in the mail, where the Notice is sent by postage prepaid mail.
22. This Agreement will come into force on the date on which the second of the two parties has signed it.

For the Minister ____________________________ Date

_____________________________________________
(Print name and title)

Signature of Applicant ____________________________ Date

Personal information contained on this form is collected by virtue of it being necessary for the proper administration of a lawfully authorised activity pursuant to Section 6 of the Ministry of Health and Long-Term Care Act, RSO 1990, Chapter M. 26, and for the purpose of assessing, verifying and monitoring the return-of-service agreement.

(April 3, 2006)
MINISTRY OF HEALTH AND LONG-TERM CARE

TUITION SUPPORT PROGRAM FOR NURSES

ACCEPTANCE OF MINISTRY OFFER AND CONSENT TO COLLECTION
AND DISCLOSURE OF PERSONAL INFORMATION

A. I, ______________________________, wish to inform you that I accept the Ministry of Health and Long-Term Care's offer of a reimbursement of tuition fees in exchange for return of service in an eligible underserviced community and facility, in accordance with the Ministry's Tuition Support Program for Nurses ("Program"), and accordingly I agree to fulfill all of the terms and conditions of that Program.

B. I authorize the Ministry to collect from, and/or disclose to, the following bodies or persons all of my personal information that is pertinent to my participation in the Program and to the fulfillment of my commitment to return service in an eligible underserviced community and eligible facility:

(i) the following Canadian universities, colleges and facilities from which I have successfully graduated from an accredited nursing program:

1. ______________________________
2. ______________________________
3. ______________________________

(ii) the following hospital, facility, clinic, office or agency ("facility") in a Ministry-approved eligible underserviced community (as set out in my Confirmation of Employment) where I propose to return service under the Program:

__________________________________
Name of facility

__________________________________
Name of community
Where I wish to return service in more than one facility and/or underserviced community, the following additional facility and/or community:

Name of facility

Name of community

C. I also agree to participate fully in one or more evaluation or other similar studies of the Program at the direction of the Ministry.

___________________________
Signed

___________________________
Date

The Ministry of Health and Long-Term Care is authorized to collect the personal information described in this form for the purpose of properly administering the Ministry’s Tuition Support Program for Nurses. The personal information will be used to facilitate the nurse’s participation in the Program, including the facilitation of the individual’s return-of-service commitment to a health care facility in a Ministry-approved underserviced community, in accordance with the guidelines of the Program.

For more information concerning the collection of the personal information and the Program, please write, telephone or fax:

Ministry of Health and Long-Term Care
Primary Health Care Team
Underserviced Area Program
159 Cedar Street, Suite 402
Sudbury ON P3E 6A5
Tel: (705) 564-7280 or 1-866-727-9959
Fax: (705) 564-7493

(April 3, 2006)
MINISTRY OF HEALTH AND LONG-TERM CARE
TUITION SUPPORT PROGRAM for NURSES

Confirmation of Employment

This document will confirm an offer and acceptance of employment, as of ________________ (date), between:

• ____________________________________(name of nurse); AND
• ___________________________________________(Facility), in
• ______________________________________________ (town, city).

This document will also confirm as follows:

1. ___________________________________ (name of nurse) will provide nursing services at the Facility and in the community set out above.

2. ____________________________________ (name of nurse) will begin providing services on ____________________ (day/month/year) on the following basis (full-time, or regular part-time): _____________________.

   This employment will continue until _______________________ (day/month/year).

3. At each anniversary date after the commencement of ___________________________________ (name of nurse) return-of-service, the Chief Nursing Executive (or some other authorized representative where there is no such Officer) of the facility in which he/she is returning service will provide the Ministry, as set out below, written confirmation of the basis on which ______________________________(name of nurse) has practised nursing (full-time or part-time), and the number of hours that he or she has practised, at the facility in the previous year. Such confirmation shall be sent to the Ministry, as follows:

Ministry of Health and Long-Term Care
Tuition Support Program for Nurses
Primary Health Care Team
Underserviced Area Program
159 Cedar Street, Suite 402
Sudbury ON P3E 6A5
Tel: (705) 564-7280 or 1-866-727-9959
Fax: (705) 564-7493
4. This confirmation of employment shall not be amended except by mutual agreement. Any such amendment shall be in writing and signed by the parties.

Signature of Return-of-Service Nurse ______________________________
Print Name __________________________ Date ___________

Signature of Chief Nursing Executive or other Authorized representative of Facility offering employment ______________________________
Print Name and Title __________________________ Date ___________

Employer mailing address:
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

NOTE:

A fully executed copy of this Confirmation of Employment must be submitted to the Minister by each return-of-service nurse in accordance with the terms of the Conditional Application Approval.

Personal information contained on this document is collected by virtue of it being necessary for the proper administration of a lawfully authorised activity pursuant to Section 6 of the Ministry of Health and Long-Term Care Act, RSO 1990, Chapter M. 26, and, more specifically, for the purpose of establishing, assessing, verifying and monitoring the return-of-service agreement.

(March 6, 2007)
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<th>County/Region</th>
<th>Designated Community Name</th>
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