UCBeyond 2024 Scholarship Program

HELPING STUDENTS REACH BEYOND THEIR INFLAMMATORY DISEASE



Purpose and Award

UCB Canada Inc., is a global biopharmaceutical company committed to developing innovative treatments for inflammatory diseases, such as: rheumatoid arthritis, psoriatic arthritis, psoriasis, ankylosing spondylitis, and non-radiographic axial spondyloarthritis. UCB Canada Inc. is dedicated to creating unique programs and tools to aid patients in reaching above and beyond the boundaries of their disease and fulfilling their educational ambitions. Now in its seventeenth year, the UCBeyond Scholarship Program has allocated 209 scholarships and approximately \$1,045,000.

Eligibility Requirements

This program is designed for applicants of any age. Applicants must be:

- A legal and permanent resident of Canada;
- Diagnosed with a chronic inflammatory disease (CID) by a physician;
- Seeking an associate's, undergraduate, or graduate degree from a Canadian university; a diploma or certificate from a Canadian college; or enrolled in a trade school educational program;
- A student who demonstrates academic ambition and embraces a way of life that goes above and beyond the boundaries of living with inflammatory arthritis;
- Enrolled in or awaiting acceptance from a Canadian-based institution of higher education for the fall/winter semester of 2024/2025; and
- · Has not received the UCBeyond Scholarship before.

The Selection of Recipients and Determination of the Scholarship Amount

Selection of recipients will be at the sole discretion of an independent selection committee, comprised of medical professionals and patient representatives. Winners will be notified during the month of September 2024 via a personal telephone call and a confirmation letter. After a winner's educational enrollment has been verified for the fall/winter semester of 2024/2025, the scholarship cheque will be made payable to and directly mailed to the recipient. Individual scholarship amounts will be awarded up to \$5,000 CDN to cover the recipient's tuition and/or educational

Student Information (please print or fill out fillable form)

materials and expenses (if a student does not have a minimum of \$5,000 CDN in tuition and educational material costs, the scholarship amount will only cover the actual cost of tuition and/or educational material expenses up to \$5,000 CDN). Please note that the UCBeyond Scholarship may only be awarded once to the same applicant. Employees of UCB Canada Inc. and their immediate family members are not eligible for this scholarship.

Procedures

To apply, please email the following documentation in a single PDF file to info@ucbeyond.ca by June 24, 2024.

Please note that sections of the application will need to be completed by the student, a school official or professional colleague, and a healthcare professional. Selection will be based on the following criteria, which must include:

- A one-page essay about how you are living above and beyond the boundaries
 of inflammatory arthritis to demonstrate academic ambition and personal
 achievement, and how you would benefit from the Scholarship. Past recipient
 essays have included a desire for academic achievement, perseverance in the face
 of living with a chronic inflammatory disease, how they will use the scholarship to
 fund their education, and details of school and community involvement;
- Two (2) one-page letters of recommendation from a teacher, school official, professional colleague or employer, describing your unique qualities and how you embrace a way of life that overcomes the boundaries of living with inflammatory arthritis;
- An official printed or digital academic transcript from your most recent year of education; and
- Confirmation of diagnosis of inflammatory arthritis from your treating physician.
 UCB Canada Inc. respects the privacy and confidentiality of applications submitted for the UCBeyond Scholarship. The above documentation will be destroyed by UCB Canada Inc. upon selection of the Scholarship recipients.

	Student ID#
Province	Postal Code
Home Phone	Cell Phone
Program. I confirm that I am 18 years of age or older and the late of the family member of a UCB Canada Inc. employee.	hat I meet the eligibility requirements.
	Date / /
i	Home Phone Program. I confirm that I am 18 years of age or older and t ate family member of a UCB Canada Inc. employee.

Parent/Guardian Permission: I acknowledge that I am the parent or legal guardian of the applicant and, in that capacity, understand the conditions under which he/she is entering



his/her application in the UCBeyond 2024 Scholarship Program.

Parent/Guardian Signature







UCBeyond® 2024 Scholarship Program



HELPING STUDENTS REACH BEYOND THEIR INFLAMMATORY DISEASE

Section I: Academics (To be completed by the student)

Name of post-secondary educational institution				
What type of degree are you pursuing? ☐ Associate's ☐ Undergraduate ☐ Grad	luate □ Certificate □ Ot	her Degree		
In what year of your current program will you be in the fall/winter semester of 20	24/2025?			
School Address				
School/Address				
City	Prov		Posta	l Code
Your Address at School (your address in September 2024 if different from page 1) _				
City	Prov.		Posta	l Code
Honours and Achievements:				
All Scholarships/Grants Applied for or Received for your 2024/2025 scho	ool year:			
Title/Amount	Date	/	/	Received
me/Amount	Date	/	/	Neceiveu
Title/Amount	Date	/	/	Received
Title/Amount	Date			Received
Title/Amount	Date	/	/	Received
(To be completed by your school official, ie. Registrar, school administrat	or, guidance counselor)		
Academic Standing				
-				
Applicant's Major (not necessary for students completing high school in 2024)			Minor	
Applicant's Grade Point Average on a	a scale of			
Signature (School Official)				
Title			Date	/











UCBeyond® 2024 Scholarship Program





Section II: Recommendations (To be completed by a teacher, school official, professional colleague or employer)

Please provide two (2) one-page letters of personal recommendation that express the following:

- The nature of your relationship with the applicant
- The applicant's unique qualities and how he/she embraces a way of life that overcomes the boundaries of living with inflammatory arthritis.

Section III: Health

(To be completed by a health care professional who can confirm the inflammatory arthritis diagnosis)

By signing below, the applicant authorizes UCB Canada Inc. and all their affiliates, if awarded the UCBeyond Scholarship, to publish, copyright, and use the information contained in this application in advertising and other promotional materials without prior approval, including display on the Internet. UCB Canada Inc. is authorized to share the applicant's information and individual story with the mass consumer media. The applicant authorizes UCB Canada Inc. to contact him/her directly and to enter the applicant's contact information into a UCB Canada Inc. patient database for future communications from UCB Canada Inc. In addition, recipients may be called upon to share their stories with the mass consumer media (print, radio or television) either by phone or in person, about living with inflammatory arthritis to help inspire others struggling to find ways in which to cope with the disease. Participation in the matters outlined in this paragraph is a condition of receiving of the Scholarship. Should the applicant be unwilling or unable to comply with the requirements of this paragraph, an alternate Scholarship recipient may be selected. Selection of recipients will be at the sole discretion of an independent selection committee, comprised of medical professionals and patient representatives. Winners will be notified during the month of September 2024 via a personal telephone call and a confirmation email. After a winner's educational enrollment has been verified for the fall/winter semester of 2024/2025, the scholarship cheque will be made payable to and directly sent to the recipient. Individual scholarship amounts will be awarded up to \$5,000 CDN in tuition and educational material cost the scholarship amount will only cover the actual cost of tuition and/or educational material expenses up to \$5,000 CDN). Please note that the UCBeyond	(To be completed by a fleatiff care profes	SSIONAL WITO CAN COMMITTE THE IN	mariinatory artiintis	ulagriosis)		
Office Address City Prov. Postal Code Telephone Signature Credentials Date / / Section IV: Documents Provided By the Student Applicant Please submit a one-page essay about how you are living above and beyond the boundaries of inflammatory arthritis to demonstrate academic ambition and personal achievement and how you would benefit from the scholarship. Please note, essays that exceed one-page single spaced, font size smaller than 11pt or margins less than one inch, will not be eligible for consideration. Section V: Applicant Consent Sysigning below, the applicant authorizes UCB Canada Inc. and all their affiliates, if awarded the UCBeyond Scholarship, to publish, copyright, and use the information contained in this papilicant in advertising and other promotional materials without prior approval, including display on the Internet. UCB Canada Inc. Is authorized to share the applicant's information and individual story with the mass consumer media. The applicant authorizes UCB Canada Inc. to contact him/her directly and to enter the applicant's contact information into a UCB Canada Inc. patient database for future communications from UCB Canada Inc. to contact him/her directly and to enter the applicant's contact information into a UCB Canada Inc. and the promotion of the properties of the Scholarship. Should the applicant be unwilling or unable to copy with the disease. Participation in the matters outlined in this paragraph is a condition of receiving of the Scholarship. Should the applicant be unwilling or unable to comply with the requirements of this paragraph, an alternate Scholarship recipient may be selected. Selection of recipients will be at the sole discretion of an independent selection committee, comprised of medical professionals and patient representatives. Winners will be notified during the month of September 2024 via a personal telephone call and a confirmation email. After a winners educational emrollment has been ve	□ I certify that this applicant has been diagnosed with ir	nflammatory arthritis and is under my me	edical care.			
Signature Credentials Date / / Section IV: Documents Provided By the Student Applicant Please submit a one-page essay about how you are living above and beyond the boundaries of inflammatory arthritis to demonstrate academic ambition and personal achievement and how you would benefit from the scholarship. Please note, essays that exceed one-page single spaced, font size smaller than 11pt or margins less than one inch, will not be eligible for consideration. Section V: Applicant Consent By signing below, the applicant authorizes UCB Canada Inc. and all their affiliates, if awarded the UCBeyond Scholarship, to publish, copyright, and use the information contained in this application in advertising and other promotional materials without prior approval, including display on the Internet. UCB Canada Inc. is authorized to share the applicant in Information and individual story with the mass consumer media. The applicant authorizes UCB Canada Inc. is authorized to share the applicants in Information and individual story with the mass consumer media. The applicant prior the promotion of the applicant store information into a UCB Canada Inc. patient database for future communications from UCB Canada Inc. In addition, recipients may be called upon to share their stories with the mass consumer media (print, radio or television) either by phone or in person, about living with inflammatory anthritis to help inspire others struggling to find ways in which to cope with the disease. Participation in the matters outlined in this paragraph is a condition of receiving of the Scholarship. Should the applicant be unwilling or unable to comply with the requirements of this paragraph, an alternate Scholarship recipient may be selected. Selection of recipients will be at the sole discretion of an independent selection committee, comprised of medical professionals and patient representatives. Winners will be motified during the month of September 2024 via a personal telephone call and a confirmation email. After a winner's educa	Name					
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Signature Date / /	, , , , , , , , , , , , , , , , , , , ,	The state of the s				
	Signature		D	ate		









UCBeyond® 2024 Scholarship Program



Checklist for submission



□ Completed application form
□ One-page essay
☐ Academic transcript
☐ Confirmation of inflammatory arthritis diagnosis from your treating physician
☐ Two (2) one-page letters of personal recommendation from a teacher, school official, professional colleague or employer
☐ Please combine all files into one PDF file and submit one single PDF application document by email to info@ucbeyond.ca
How did you learn about the UCBeyond Scholarship Program?
□ Doctor's Office
□ Media
☐ Social Media (Facebook)
☐ The Arthritis Society
☐ Canadian Spondylitis Association
☐ Other (please specify)
Have you applied for the UCBeyond Scholarship in the past?
□ Yes
□ No

Thank you for applying for the UCBeyond 2024 Scholarship Program. We wish you the best of luck!

Be sure to complete and email the application, in one PDF, to info@ucbeyond.ca by June 24, 2024.

For more information, please contact:

UCBeyond Scholarship Program

info@ucbeyond.ca • 1-855-UCBYOND (822-9663) • www.ucbeyond.ca

Check out our Facebook group: UCBeyond Scholarship Program

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