

# *The Layton MacLeod Memorial Bursary*



Layton Macleod worked as an EMC/EHS Intermediate Care Paramedic who proudly served the beautiful province of Nova Scotia for nearly 30 years until his death on June 17th, 2021. In his memory, we are looking to award an annual financial bursary for two thousand dollars (\$2000) to a Nova Scotia resident attending the Primary Care Paramedic program in one of the Atlantic Provinces (Nova Scotia, New Brunswick or PEI). Award from the Bursary will be issued directly to the successful applicant.

## Application Instructions

1. Complete the application form attached by typing or writing your responses directly into the file. If you have downloaded and saved the application to your computer, you can save and resume working on your application at your own pace.
2. Upload the following items and submit them as one single package by email to: [laytonmemorial@gmail.com](mailto:laytonmemorial@gmail.com). Subject line should be "[Your Name Application]."
  - a. Application Form
  - b. Your Resume
  - c. An essay outlining what has led you to become a Paramedic Student, how you demonstrate leadership within your Nova Scotia community and also how this bursary may help you financially.

We sincerely thank everyone who takes the time to apply for this bursary. We wish could help every applicant. However, we will only be contacting the successful applicant by September 1<sup>st</sup>, 2025.

If you have any questions, please email [laytonmemorial@gmail.com](mailto:laytonmemorial@gmail.com) using the subject line "Bursary Question - [Your Name]."

Best regards,



Matt Piggot  
Advanced Care Paramedic



Angus MacLeod  
Primary Care Paramedic

**Deadline: August 1st, 2025, at 6:00 PM AST**

# *The Layton MacLeod Memorial Bursary Application Form*

## **PERSONAL INFORMATION:**

Applicant Full Name	
Age	
Email Address	
Street Address	
City	
Province	
Postal Code	
Phone Number 1	
Phone Number 2	

## **HIGH SCHOOL ATTENDED:**

Name	
Graduation Year	
Street Address	
City	
Province	
Postal Code	

## **UNIVERSITY, COLLEGE OR EDUCATION FACILITY PLANNING TO ATTEND:**

Name	
Expected Graduation Date	
Street Address	
City	
Province	
Postal Code	

**\*\* Ensure you attach this application form, your Resume and essay to the email\*\***

**Deadline: August 1st, 2025, at 6:00 PM AST**