

**REGULATIONS FOR SCHOLARSHIP APPLICATIONS**

1. Applications must be completed on forms available at [www.cfuworillia.org](http://www.cfuworillia.org). Please complete the forms by typing your responses and submitting to cfuworilliascholarships@gmail.com. Handwritten applications will not be accepted. Reference letters must also be typed. Submit as one PDF document using your first and last name as the filename. Application due date is **Thursday April 14, 2022.**

2. Scholarships will be awarded to applicants that best qualify under the following criteria:

* Academic ability
* Integrity
* Love of learning
* Leadership
* School and community involvement
* Financial need

3. A committee of CFUW Orillia will select the recipients.

4. Two letters of reference are required – one academic and one personal (i.e. workplace, volunteer workplace, family friend, clergy but not a relative).

5. An official transcript of the applicant’s academic record to date must be included with the application.

6. Should circumstances change, the onus is on the scholarship recipient to inform CFUW Orillia or the Chair of the Scholarship Committee and return the cheque.

DOCUMENTATION CHECK LIST

• **SIGNED** and completed application form

• Reference letter # 1 (academic)

• Reference letter # 2 (personal)

• **OFFICIAL TRANSCRIPT OF ACADEMIC RECORD**

Submit as **\*ONE PDF DOCUMENT\*** only - using your first and last name as the filename!

Application due date is **Thursday April 14, 2022.**

**For more assistance:**

**Email** cfuworilliascholarships@gmail.com **- noting “Scholarship Question” in the subject line.**

Canadian Federation of University Women Orillia

**SCHOLARSHIP APPLICATION FORM** **2022**

|  |  |
| --- | --- |
| Name: | Date of Birth: |
| Street Address:City:Postal Code: | Phone: |
| Email: Communication will be via email. It is your responsibility to advise CFUW Orillia if you change your email address. |
| Which school did you graduate from?\_\_\_ Orillia Secondary School \_\_\_ Patrick Fogarty Secondary School\_\_\_ Orillia Learning Centres \_\_\_ Twin Lakes Secondary School\_\_\_ Online / Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |

We like to publish scholarship recipients in local media. Please indicate your consent.

\_\_\_ I consent to publication of my picture. \_\_\_ I consent to publication of my name.

\_\_\_ I certify that I have not used any paid professional services to complete this application

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant’s Signature Date

Double check the Documentation Check List (page 1) to ensure that your application is complete.

**Deadline for applications is Thursday April 14, 2022**

**Late, incomplete, or applications without reference letters** will not be considered.

**MATURE STUDENT:**

What is your overall average for credits on your transcript for grades 11 and 12?

 \_\_\_\_\_\_\_\_\_\_\_

Instructions: Total all marks for these grades and divide by the number of credits.

 For half credits divide the final mark in two before adding it in.

Attach a copy of your transcript of academic record.

1. Why did you choose not to pursue post-secondary education immediately after high school?

2**.** Tell us about activities you participated in at high school. Detail your involvement in each activity and include any ways that you demonstrated leadership.

3. What skills and knowledge have you gained from work/life experiences that will help you as you further your education?

4. Are there courses taken and not listed on transcript that you would like to include?
(IE: First Aid, computer, ECE)

**MATURE STUDENT**

Detail your involvement and include any ways that you demonstrated leadership and were a positive role model for others.

|  |  |
| --- | --- |
| **At Your****School** | **1.** |
| **2.** |
| **3.** |
| **With Family** **and Friends** | **1.** |
| **2.** |
| **3.** |
| **In Your****Community** | **1.** |
| **2.** |
| **3.** |
| **In Your****Employment** | **1.** |
| **2.** |
| **3.** |

**MATURE STUDENT: PERSONAL BACKGROUND**

Compose a paragraph of at least 200 words explaining how you meet the required criteria for a scholarship (refer to page 1) and how receiving a CFUW scholarship would help with your postsecondary goals.

**CAREER GOALS**

1. Which colleges**/**universities have accepted you, or have you applied to, as a student?

2. What are your future career goals?

**OPTIONAL QUESTION:**

Is there any other information you would like to share with us that you think would help us in evaluating your application? For example, describe a moment in your life that made you feel particularly proud of yourself.



**CANADIAN FEDERATION OF UNIVERSITY WOMEN** **ORILLIA**

Academic Letter of Reference for Scholarship Applicant. Be sure letters are typed.

Scholarships are awarded to candidates who best qualify under these criteria:

* Academic ability
* Integrity
* Love of learning
* Leadership
* School and community involvement
* Financial need

Please comment on any of the above criteria which apply to your experience with the applicant.

Reference for: Recommendation By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to the Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Canadian Federation of University Women** **Orillia**

Personal Work Letter of Reference for Scholarship Applicant.(i.e. workplace, volunteer workplace, family friend, clergy but not a relative). **Be sure letters are typed.**

Scholarships are awarded to candidates who best qualify under these criteria:

* Academic ability
* Integrity
* Love of learning
* Leadership
* School and community involvement
* Financial need

Please comment on any of the above criteria which apply to your experience with the applicant.

Reference for: Recommendation By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to the Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_