

SCHOLARSHIP APPLICATION

IMPORTANT GUIDELINES

- All sections of the MUST be completed electronically
- Incomplete applications will not be considered by the committee
- Describe how intended education program would contribute towards the objectives of the SVU scholarship program (in section 2; see scholarship guidelines for details)
- Attach proof of registration application either through a tuition receipt or copy of a timetable
- The scholarship decisions are announced by the end of September of the year of application
- There are no appeals on scholarship decisions

PERSONAL IDENTIFICATION

Surname		First name		Middle initial	
Address		City		Province	
Postal code		SIN		Year of birth	
Phone		Fax		E-mail	

SECTION 1

LIST THE HIGH SCHOOL FROM WHICH YOU GRADUATED, AND ALL HIGHER EDUCATION INSTITUTIONS YOU HAVE ATTENDED (INCLUDING THE ONE YOU ARE CURRENTLY ATTENDING).

SUMMARY OF ACADEMIC ACHIEVEMENTS:

SCHOOL ATTENDED	YEAR COMPLETED	REFERENCE CONTACT / NAME / PHONE / E-MAIL

LIST AWARDS, SCHOLARSHIPS, PUBLICATIONS OR SPECIAL RECOGNITIONS (IN DESCENDING ORDER OF SIGNIFICANCE).

SECTION 2

DESCRIBE THE EDUCATION PROGRAM YOU INTEND TO PURSUE IF YOU RECEIVE A SVU SCHOLARSHIP, AND HOW IT WILL CONTRIBUTE TOWARDS THE OBJECTIVES OF THE SCHOLARSHIP PROGRAM (SEE SCHOLARSHIP GUIDELINES FOR DETAILS).

LIMIT 1000 CHARACTERS INCLUDING SPACES.

NOTE: THIS SECTION MUST BE COMPLETED IN ORDER FOR THE APPLICATION TO BE CONSIDERED.

SECTION 3

APPLICANTS DECLARATION AND AUTHORIZATION

· I DECLARE THAT THE FOREGOING INFORMATION IS TRUE, COMPLETE AND ACCURATE.

INSERT YOUR NAME HERE TO CONFIRM THE ABOVE STATEMENT

SAVE FILLED FORM TO A FILE!
PRINT THIS APPLICATION FOR YOUR RECORD!

SEND COMPLETED FORM BY E-MAIL TO
SCHOLARSHIPS@SVU-EDMONTON.ORG

ALTERNATIVELY, PRINT AND SEND BY MAIL TO
CZECHOSLOVAK SOCIETY OF ARTS AND SCIENCES OF ALBERTA
C/O SCHOLARSHIP COMMITTEE
P.O. Box 52140
EDMONTON, ALBERTA
T6G 2T5