

WAYNE PERRY MEd (DE) STUDENT RESEARCH AWARD

Donor: Dr. Pamela Walsh

Value: \$1,000

Number: 1

Description

The Wayne Perry Master of Education in Distance Education ((MEd (DE)) Student Research Award is awarded annually to a student at Athabasca University. It provides recognition and support for exceptional students pursuing a Masters degree through the Centre for Distance Education at Athabasca University. This award intends to provide the student with funds to support their graduate research.

Conditions of Eligibility

An applicant must meet the following criteria to be eligible to apply for this award:

- Be a current student of the AU MEd (DE) Program.
- Have successfully completed at least 12 months of the MEd (DE) program.
- Have minimum GPA of 3.5.
- Have completed MDDE701 (Quantitative Research Methods) and is currently enrolled in MDDE702 (Qualitative Research Methods).
- Be in good academic standing.
- Have not previously received this award.
- Submit a fully completed application, to the Student Awards Unit at Athabasca University.

Application Submission Deadline

- November 15 Annually

Application instructions

- Submit your application here: Student Awards Application System Or navigate back to award listing to submit.

Award Notification

Successful applicants should expect to be notified within one month of the selection committee convening to choose recipients.

Questions?

Visit the Athabasca University Awards website located at: <http://www.athabascau.ca/registrar/studawrds.php> or email awardsinfo@athabascau.ca or call toll free 1-800-788-9041 extension 6197 or 780-675-6197 with your inquiries.



APPLICATION FORM FOR WAYNE PERRY MEd (DE) STUDENT RESEARCH AWARD

Before completing this application form, please ensure that you meet all the eligibility criteria and that you can demonstrate the qualities we are looking for in the selection criteria.

A. PERSONAL INFORMATION

Athabasca University Student Identification Number:

Social Insurance Number:

Last Name:

First Name:

Middle Name:

Mailing Address:

Mailing Address 2:

City:

Province:

Postal Code:

Country:

Primary Telephone Number:

Alternate Telephone Number:

Email Address:

B. CURRENT POST-SECONDARY EDUCATION INFORMATION

Complete the information requested below. Information will be verified with your student record, and other sources, if required.

In which AU program are you enrolled?

Have you successfully completed at least 12 months of the MEd (DE) program? Yes No

What is your cumulative program GPA? (Go to MyAU portal, click on "Request Transcript", click on "Preview" to view your GPA)

Have you completed MDDE701 (Quantitative Research Methods) and are you currently enrolled in MDDE702 (Qualitative Research Methods)? Yes No



C. REQUIRED CERTIFICATION AND RELEASE

I certify that the information provided in this application and in the accompanying documentation is true, accurate and complete. I authorize the provision of any information held or to be held by Athabasca University, and others relating to my application, including but not limited to personal evaluations and transcripts, to the Student Awards Unit of Athabasca University and the Selection Committee chosen for this award. I understand and accept that: (1) such information will be used by the Student Awards Unit and the awards selection committee of Athabasca University for the purposes of selection, for statistical analysis, and to facilitate ongoing administrative correspondence with applicants, necessary to further the objective of the Athabasca University Student Awards Program and to improve selection process; (2) the Athabasca University will not release application evaluation or the results of the evaluation process, except to inform me if my application has been accepted for an award; and (3) for all questions regarding my personal information held on file by the Athabasca University, including updates thereof, I may reach an Athabasca University representative through the contact information provided within this award package; and (4) if my application is selected for this award, I authorize the publication of my name and the name of the award received on the Athabasca University website and in reports to governing bodies of Athabasca University. I understand that should my application be selected for this award, I am subject to the reporting obligations of the Canada Revenue Agency regarding scholarships, fellowships, bursaries, study grants, and artists project grants. Finally, if my application is selected for this award, I will: (1) provide a thank you letter to the Student Awards Unit of Athabasca University to be forwarded to the donor of the award and (2) agree to a request for a photo opportunity should one be forthcoming.

Name of Applicant:

Date:

Your personal information is collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act*, R.S.A. 2000, c. F-25 and the *Post-Secondary Learning Act*, S.A. 2003, c. P-19.5.