



William S. Herron Family Charitable Foundation First in Family Awards for Calgary and Area Students

Donor: William S. Herron Family Charitable Foundation
Value: \$2000
Number: Two (2)

Description of the Award

William S. Herron Family Charitable Foundation First in Family Awards offer recognition and financial support to Athabasca University program students who live in Calgary and area who are the first in their families to attend a post-secondary institution.

Conditions of Eligibility

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

- Successfully completed at least 9 credits at AU and be enrolled in an undergraduate degree program at AU.
- Neither grandparents, parents, nor siblings have earned a post-secondary credential, i.e. university, college or technical diploma, certificate or degree.
- Students must be residents of Calgary and area including the City of Calgary, City of Airdrie, MD of Foothills No. 31, Mountainview County, Rockyview County, Wheatland County and Improvement District No. 9 (Banff)
- Students may only receive the award once

Application Deadline:

October 15th

Application Instructions:

Submit your application here: [Student Awards Application Submission](#) 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>
Email your inquiries to: awardsinfo@athabascau.ca or call toll free: 1-800-788-9041 extension 6197 or 780-675-6197.



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Before completing this application form, please ensure that you meet all the eligibility criteria and that you can demonstrate the qualities of the selection criteria.

A. PERSONAL INFORMATION

Athabasca University Student Identification Number:

Social Insurance Number:

Last Name:

First Name:

Middle Name:

Mailing Address 1:

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 **undergraduate program** are you enrolled?

How many AU credits have you completed towards your program?

What is your cumulative program GPA?

(Go to MyAU portal, click on "Request Transcript", then click on "Preview" to view your GPA.)



C. SHORT ESSAY RESPONSE

Please respond to the statement below. Limit your essay to 300 words or less. A missing essay will disqualify you.

1. Please describe the educational achievements of your family, (grandparents, parents and siblings) and explain how a university education would impact your life situation.

D. 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 scholarship. 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 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.