



# Syncrude/Athabasca University Aboriginal Scholarship

"The personal information collected on this form will be used for the purpose of determining eligibility for this educational award. This information will be shared with Syncrude. It is collected under the authority of the Alberta Universities Act that mandates the programs and services offered by Athabasca University and Section 32(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected by the provisions of the Alberta Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and use of this information, contact the Registrar, Athabasca University, 1 University Drive, Athabasca, AB Canada T9S 3A3. Telephone (780) 675-6111"

Print or type all information except signature

## MAILING ADDRESS

Ms. Miss, Mrs., Mr.

Surname \_\_\_\_\_ First \_\_\_\_\_ Initial \_\_\_\_\_

Number / P.O. Box / Street \_\_\_\_\_

City / Town \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

## DATE OF BIRTH

/ /  
Year Month Day

Phone Number: ( ) \_\_\_\_\_

Area Code \_\_\_\_\_

## LENGTH OF RESIDENCE

In \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_  
How long Alberta Date / Year Date / Year

Number of Dependents: \_\_\_\_\_ Married: \_\_\_\_\_ Single: \_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Social Insurance Number

## STATUS

Metis: \_\_\_\_\_ Status/Non-Status Indian: \_\_\_\_\_ Inuit: \_\_\_\_\_

Treaty Band Number: \_\_\_\_\_

## FINANCIAL

Parent(s) or Spouses Income

Name of Parent(s) or Spouse: \_\_\_\_\_

Parent(s) or Spouse Yearly Income: \_\_\_\_\_

## MONTHLY INCOME (STUDENT)

Actual income while in school

Wages/Salary after deductions	01	
Your Spouse's income after deductions	02	
Contribution from parents	03	
Alimony and/or Child Support	04	
Government Funding: Employment Insurance (UI Benefits)	05	
Federal Training Allowances	06	
Workers' Compensation Benefits	07	
Indian and Northern Affairs/Band Funds	08	
Other income (eg. orphan's benefits, pensions, rental property, business) List:	09	
TOTAL MONTHLY INCOME (Add lines 01 to 09)	10	

\$ Amount

Scholarships, grants, awards that I have received or will be receiving:	

WHILE ATTENDING SCHOOL I WILL LIVE:  Parent(s) Home  Rental Accommodation  Student's Residence  Own Home  Subsidized Housing

## EDUCATION

Please attach most recent high school or college transcripts.

	Name of Institution	Highest Grade/ Program Completed	Year of Completion
High School			
Post-Secondary			

continued...

**PROGRAM OF STUDIES**

- \_\_\_\_\_ Bachelor of Admin (major in Mgmt., Ind. Rel., or Organization) \_\_\_\_\_ Bachelor of Science degree program
- \_\_\_\_\_ Bachelor of Admin (post diploma in Mgmt., Ind. Rel., or Organization) \_\_\_\_\_ Bachelor of Science (post diploma)
- \_\_\_\_\_ Bachelor of Commerce \_\_\_\_\_ Bachelor of Science in Computing and Information Systems
- \_\_\_\_\_ Bachelor of Nursing \_\_\_\_\_ Bachelor of Science (Post Diploma) in Computing and Information Systems
- \_\_\_\_\_ \_\_\_\_\_ Bachelor of Arts with major in Information Systems

**CAREER OBJECTIVES  
COMMUNITY ACTIVITIES**

Please attach to this application your answer to the following three questions:

1. Describe your reasons for choosing the program of studies indicated above.
2. Describe your career objectives.
3. Describe the community extracurricular activities you have been or are currently involved in.

**WORK EXPERIENCE**

Begin with your most recent employer and include summer and/or part-time employment.

Employer	Supervisor's Name	Length of Employment		Type of Duties
		From	To	

**FURTHER COMMENTS**

Please add any further comments you would like to make regarding your application for the Syncrude/Athabasca University Aboriginal Scholarship


**SELECTION**

Criteria to be used in selecting award recipients are: financial need, academic performance and potential and community/extracurricular activities.

**CERTIFICATION**

The information I have provided in my application for an educational award is true and complete.

\_\_\_\_\_

Date
Signature

Complete application and attach additional documentation.

Mail to: Syncrude/Athabasca University Aboriginal Scholarship

Student Awards Office  
Office of the Registrar  
Athabasca University  
1 University Drive  
Athabasca, Alberta  
T9S 3A3

\* NOTE: This information is confidential and used solely for the purpose of determining educational award recipients