

LAINE MCLEOD MEMORIAL SCHOLARSHIP

Laine Alexandra McLeod was an outstanding student who loved school and did her very best in all her endeavours. She was thoughtful of others, and the first to step forward to help someone in need. Laine was good-natured and had a terrific sense of humour. She liked to have fun and was a good friend.

Laine received numerous awards, including the silver medal for Academic Achievement and was recognized by her peers with the Student of Term Award. Laine died as the result of a motor vehicle accident on July 23, 1999 at the age of twelve. The Laine McLeod Memorial Scholarship is a tribute to her and the personal characteristics for which she was known and loved: working hard to achieve scholastic excellence and a genuine sense of caring and sharing in her school community.

- DONOR:** Endowed by family and friends of Laine McLeod
- WHERE TENABLE:** John Ware Junior High School
- FIELD OF STUDY:** Unrestricted
- VALUE:** \$500
- NUMBER:** One
- ELIGIBILITY:** Open to students registered in grade 9 at John Ware Junior High School who have achieved a minimum average of 79.5% in all subjects in the first three reporting periods. Applicant must demonstrate caring and supportive qualities to others in school spirit activities, clubs, service, team and/or special groups.
- The applicant is required to complete an essay describing why they are deserving of this award and how receiving this award will assist them in achieving their future goals. The essay must be no more than 500 words in length (one page, typed or printed).
- APPLY:** Applicants should complete the **School Specific Application form**. Complete application packages should be submitted to the Scholarship Coordinator at the Applicant's high school.
- SELECTION & PAYMENT:** School-specific. Recipients will be notified by September. To claim the award, within five (5) years of notification of award the recipient must be registered in an eligible program of post-secondary study of at least two years duration. Payment will be made to the student.
- DEADLINE:** Normally **May 30** to the Scholarship Coordinator at the Applicant's high school. Applicants should check with their Guidance office for application deadlines in their school.

SCHOOL SPECIFIC APPLICATION FOR AWARDS

SECTION I – PERSONAL & EDUCATIONAL INFORMATION

INFORMATION PROFILE					
Last Name Previous Last Name:		First Name		Middle Name	
Current Home Address:			Permanent Mailing Address (<i>if different from current address</i>)		
City	Province	Postal Code		Canadian Social Insurance Number	
Residence Telephone:		Cell Phone:		Alberta Learning ID #	CBE ID #
Date of Birth (Y/M/D)		<input type="checkbox"/> Male <input type="checkbox"/> Female		E-Mail Address	
Citizenship status:		<input type="checkbox"/> a Canadian Citizen <input type="checkbox"/> a Permanent Resident <input type="checkbox"/> attending on a Study Permit		Date of Arrival in Canada:	Country of Citizenship
EDUCATIONAL INFORMATION					
JUNIOR HIGH SCHOOLS ATTENDED:					
	School Name	City/Province		Date completed	
Grade 7					
Grade 8					
Grade 9					
LIST OTHER AWARDS APPLIED FOR, RECEIVED, OR WILL BE RECEIVING AND THEIR VALUE:					
AWARD NAME			VALUE		RECIPIENT
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Attach any additional statements required by the Terms of Reference of the award you are applying for, such as essays or proof of proficiency in a field of study or musical instrument.					

SECTION II – SCHOOL ACTIVITIES

Name:	CBE ID:	
Complete this section ONLY if applying for awards that have School Activities as criteria.		
Indicate all that apply: <input type="checkbox"/> Sports <input type="checkbox"/> Community Volunteer <input type="checkbox"/> School Volunteer <input type="checkbox"/> School Clubs <input type="checkbox"/> Students Council		
List below, in point form, all activities in which you participated during each grade, including the capacity in which you were involved and time commitment. Include any leadership positions you held and achievements you have made in areas such as citizenship, sports, the arts, music groups, clubs, teams, etc. Attach a separate sheet if necessary. You may be required to verify your participation in the activities you have listed	Contact name/phone number (for verification purposes)	# of hours per week / month
Grade 7		
Grade 8		
Grade 9		

SECTION III – PERSONAL STATEMENT OR WRITTEN ESSAY / REFERENCES

Name:		CBE ID:	
Name of Award:			
<p>Use a separate sheet to write your one-page statement or essay as defined by the Terms of Reference for the Award you are applying for. Identify the name of the award that requires this written statement at the top of the page. If you are applying for more than one award that requires a written statement, please attach a separate sheet for each award with your Name, Identification number and the Name of the Award at the top of each page for each award.</p> <p>In essays on particular topics, support your findings with primary research, documenting your sources (e.g. web sites, books). Your essay will be judged on the following criteria (<i>unless otherwise specified in the terms of reference</i>):</p> <ul style="list-style-type: none"> • Organization • Ideas and content • Clarity of expression <p>Essays must be typed on an 8.5 x 11 sheet of paper, single-spaced with three-quarter inch margins and the type size must be no smaller than 12-point font. All essays or statements must be original and written by the applicant. Plagiarism will disqualify the application.</p>			
REFERENCE LETTERS:			
<p><i>Complete this section for those awards where the Terms of Reference require a letter or letters of reference. Letter(s) must be typed and not exceed one page.</i></p>			
Name of Referee #1(Please Print/Type)		E-mail address	
Position		School or Organization	
Address		Telephone ()	
		Fax Number ()	
Name of Referee #2(Please Print/Type)		E-mail address	
Position		School or Organization	
Address		Telephone ()	
		Fax Number ()	

SECTION IV – SIGNATURE / ENDORSEMENTS

JUNIOR HIGH SCHOOL COUNSELOR (OFFICIAL) ENDORSEMENT		
<i>To the best of my knowledge and belief, I hereby verify that the academic information and summary of school activities as submitted in this application are correct, and the applicant meets the eligibility requirements as outlined in the award Terms of Reference.</i>		
Applicant's Average Grade calculation:		
Printed Name	Signature	
Title	Email	
Name of Institution	Telephone	Date
STUDENT APPLICANT & PARENT/GUARDIAN DECLARATION		
<i>This information is collected under the authority of the Freedom of Information and Protection of Privacy Act, the Taxation Act (Canada) and the Statistics Act (Canada) to determine your eligibility for scholarships and awards. Please direct any questions about the use of this information to the Scholarship Officer, EducationMatters, 515 Macleod Trail S.E, Calgary, Alberta, Canada T2G 2L9. Telephone: (403) 294-8151. ** We reserve the right to publish student essays in full or in part. If you do not want your essay to be published, please check here <input type="checkbox"/>. Recognition may take place at public award ceremonies or be displayed publicly in one or more ways including but not limited to newspaper, school newsletter, yearbook, and website, for the purpose of recognizing student accomplishment(s). If you do not wish your name published, please check here <input type="checkbox"/>.</i>		
By signing this application, I declare:		
<ol style="list-style-type: none"> 1. That I have answered all questions applicable to me and that all information is true and complete 2. That I will notify EducationMatters if I withdraw from full-time status, receive other external awards or otherwise change my student status 3. That EducationMatters may request additional information pertaining specifically to my academic performance and enrolment status for the purpose of determining my eligibility for scholarships/awards 4. That in applying for an award, pertinent information may be released to the donor of the award, provincial funding bodies, faculty offices, appropriate EducationMatters and Calgary Board of Education / Calgary Catholic School District administrative offices 5. That if I receive a scholarship/award the amount may be disclosed to the CBE or CCSD Financial Services Office 6. That I understand the information provided on this application may be used for research and statistical analysis 7. That if any information is inaccurate, I understand that any awards may be reassessed and/or withdrawn 8. That if I receive an award, I will acknowledge the private donor(s) of the award with a personal letter of thanks 		
Name of Applicant (Printed):	CBE ID Number:	
<i>Signature</i>	<i>Date</i>	
<i>I acknowledge and agree that the disclosure of the information provided for this application, including my personal financial information, is required for the assessment of my child's/dependant's eligibility for this award, and I hereby grant such consent as may be required by applicable privacy laws to the disclosure of my personal information for the purposes of assessing my child's/dependant's eligibility.</i>		
Name of Parent(s)/Guardian(s) - (Printed):		
<i>Signature</i>	<i>Date</i>	

SUBMIT YOUR COMPLETED APPLICATION DIRECTLY TO YOUR SCHOOL PRINCIPAL