

# Stoughton Credit Union Ltd. Scholarship Program

**OBJECTIVE:** 

To support the youth in our community in the pursuit of post-secondary education

To provide three scholarships in the amount of \$500.00 each annually to three graduating grade twelve students.

#### **CRITERIA**

- 1. The Student or a parent must be a member of the Stoughton Credit Union for at least one year prior to the application date.
- 2. The Student must be completing Grade 12 standing in the year the scholarship is applied for.
- 3. The Student must be furthering his/her education at a post secondary institution.
- Qualifying institutions are Canadian University, recognized Technical Institution, Business College.

Applications are available at the Stoughton and Arcola schools or at either office of the Credit Union in Stoughton or Kisbey. Applications close May 12, 2023.

Presentations will try to be made at each recipients graduating ceremonies.

The Scholarship shall be paid a) \$250 upon confirmation of enrollment b) \$250 upon confirmation of enrollment in 2<sup>nd.</sup> Semester.



# **SCHOLARSHIP APPLICATION 2023**

Please <b>type</b> your answers. <i>Use an additional piece of paper if necessary.</i>						
1.	Last Name:	First Name, Middle Initial:				
2.	Mailing Address					
	Street: City:	Province:	Postal Code:			
3.	Daytime telephone number:					
	Email address:					
4.	Date of birth:  Month  Day  Year					
5.	Name and location of high school:					
6.	An official transcript of my Grade 10, Grade 11 and most recent Grade 12 marks are:					
	a) Enclosed b) Will be forwarded					
7.	A. List any academic honours, awards ar	nd membership activit	ies while in high school:			
	B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities:					
	C. List your non-school sponsored volunte	eer activities in the co	ommunity:			



8.	A. If you have decided on the college you will attend, please list the school's name:					
	B. If not, list your top three (3) college choices:					
9.	Anticipated field of st	udy & length:				
10.	If you have been wor	king part time:				
	a) Where: b) How Long:		<u> </u>			
	Name & address of parent(s) or legal guardian(s):  (Include address if different than your own listed in Question 2.) Name(s):					
11.						
	Street:					
	City:	Province:	Postal Code:			
	City: Home phone of parel		Postal Code:			
12.		nts/legal guardians:	Postal Code:			
12.	Home phone of pare	nts/legal guardians:	Postal Code:			
12.	Home phone of pare	nts/legal guardians:	Postal Code:			
12.	Home phone of parel Other pertinent inforr	nts/legal guardians:				
	Home phone of parel Other pertinent inforr	nts/legal guardians: nation about myself:				
	Home phone of parel Other pertinent inforr	nts/legal guardians: nation about myself:				
13.	Home phone of parel Other pertinent inform Career aspirations up	nts/legal guardians: nation about myself: oon graduation from my fiel	d of studies are:			
	Home phone of parel Other pertinent inform Career aspirations up	nts/legal guardians: nation about myself:	d of studies are:			
13.	Home phone of parel Other pertinent inform Career aspirations up	nts/legal guardians: nation about myself: oon graduation from my fiel	d of studies are:			



#### STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent, that if chosen as a scholarship winner, my picture may be taken and used to promote Stoughton Credit Union Ltd. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to Stoughton Credit Union Ltd. Scholarship policy, it is my responsibility to submit to the Stoughton Credit Union Ltd., no later than July 2023, a certificate of enrollment for the fall semester, which includes the Student ID number.

I hereby understand I will not submit this application without all required attachments and



Checklist:		
Application		
Guidance Counselor signature		

## **MAIL COMPLETED APPLICATION PACKAGE TO:**

Stoughton Credit Union Attn.: Scholarship Committee P.O. Box 420 Stoughton, SK S0G 4T0

## **REMINDER:**

Applications must be received by the Stoughton Credit Union no later than May 12, 2023

There will be no exceptions!