

The Sakitawak Development Corporation

*John P. Daigneault Memorial Scholarship Fund*  
*10 - \$1000.00 Scholarships Available.*

APPLICATION FORM

Candidates applying for this Scholarship program must be permanent residents of Ile a la Crosse who have been accepted into a program of post-secondary studies at an institute or university approved by the Finance, Audit, and Risk Management Committee.

Candidates are eligible to receive up to two academic year awards for which they must submit annual applications.

Completed application forms and required documents are to be received by the Sakitawak Development no later than August 30<sup>th</sup> of each year.

Incomplete Applications will not be considered.

**PERSONAL:**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Birth Date: Y \_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_

Is this your first application to this Fund? Yes \_\_\_ No \_\_\_

**ACADEMIC STUDIES**

Name of institute or university you are planning to attend \_\_\_\_\_

Name the program of studies you are enrolled in: \_\_\_\_\_

Program of studies will lead to: Certificate \_\_\_ Diploma \_\_\_ Degree \_\_\_ Other \_\_\_

Is this course Full Time Studies? Yes \_\_\_\_\_ No \_\_\_\_\_

If NO, Please Explain? \_\_\_\_\_

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## ACADEMIC HISTORY

High School Completed in what year \_\_\_\_\_

Have you taken any other post-secondary training: Yes\_\_ No\_\_ Completed?

Explain \_\_\_\_\_

## REQUIRED ATTACHMENTS

- Please write a letter of at least 500 words or less explaining why you need financial assistance, stating your life and career goals, and how your chosen course of studies will assist you in achieving your goals.
- Attach grade 12 transcripts from the Ministry of Education.
- Attach the letter of acceptance from the institute or university.
- Attach a Personal Resume.
- Attach two letters of reference from qualified persons.
- Attach a colour headshot photo (to be used in advertisements or promotional materials of this Scholarship Fund).
- It is required that (if successful) you must provide verification of registration from the institute before the scholarship is released.

## DECLARATION

I hereby declare that the information that I have provided is correct and that I plan to be a full time student in the post-secondary program during the academic term stated above.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_