



APPLICATION FOR UNIVERSITY OF LETHBRIDGE LAVALLEY GRADUATE STUDIES AWARD

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| Purpose | U of L alumnus, Cindy LaValley, has established this award as a tribute to her parents, lifelong southern Alberta's Mona and Stanley LaValley, who viewed access to education as an important pathway to success. The award will serve as encouragement for students from rural and small town communities to pursue graduate studies |
| Eligibility | Canadian Citizens/Permanent Resident registered in full or part time students either entering or continuing in a U of L graduate studies program. Must reside in, or have just moved from, a rural or small town community in southern Alberta prior to starting at the U of L. |
| Value | \$1,500 tenable upon confirmation of enrolment at the University of Lethbridge in the Fall, Spring and Summer semesters immediately following the granting of the award |
| Criteria | <ul style="list-style-type: none">• Canadian Citizen, Permanent Resident; entering or continuing in any full or part-time Master's Ph.D. program at the University of Lethbridge.• Must reside in, or have just moved from, a rural or small town community in Southern Alberta• Academic achievement based on GPA and financial need• Working Transcripts |
| Further Information | For the attention of: SGS Awards Advisor Email: sgs.awards@uleth.ca |
| Deadline | June 1 If the deadline falls on a weekend then submit on the next business day |
| Submit | Completed applications returned to: SGS Award Advisor It is your responsibility to ensure that all requested information is attached and received by the stated deadline. Incomplete or late applications will not be considered. The University of Lethbridge is not responsible for any applications lost in the delivery system. |
| FOIP | <u>FOIP Notification</u> The personal information on this form is collected under the authority of the <i>Post-secondary Learning Act (Alberta)</i> and the <i>Freedom of Information and Protection of Privacy Act (Alberta)</i>. The information collected will be used to administer the University's Graduate Awards. For successful applicants, the information collected will also be used to promote this program and shared with the donors and other University units. Questions on the collection, use or disclosure of this information must be directed to the University of Lethbridge FOIP Coordinator, 403-332-4620 or foip@uleth.ca. |

PERSONAL INFORMATION

First Name:

Last Name:

U of L ID Number:

Canadian Citizen

Permanent Resident

International

Home Community:

PERIOD OF STUDY AT THE UNIVERSITY OF LETHBRIDGE:

Program Semester Start Date:

Program Start Year:

Program you are currently in:

Year of Study:

Department:

Status:

FUNDING

Please indicate all sources of funding you are presently receiving:

Graduate Teaching Assistantship

Research Assistantship Amount:

Other Please indicate the source and amount below:

Source:

Amount \$:

SIGNATURE

This application must be signed. I hereby certify that the information given on this application is complete and true in all respects. If granted an award, I authorize the Scholarships and Student Finance Office to release pertinent information to the donor of the award, various University of Lethbridge departments and the news media.

Date:

Signature: