

**Interlake Women's Resource Centre
Eleanor Milne Scholarship**

APPLICATION FORM

Be sure that the information you provide on the Application form is up-to-date, accurate and complete.

WOMAN'S CONTACT INFORMATION

Family Name	
Given Name (s)	
S.I.N.	
D.O.B. dd/mm/yyyy	
Mailing Address	
Telephone #	
E-Mail address	

EDUCATION

Institution you plan to attend	
Admission confirmed (circle)	Yes No
Program of study for which you have been accepted	
What year of study are you entering (circle)	1 st 2 nd 3 rd 4 th 5 th
Length of the program (in years)	
Degree/Diploma at graduation	
Year you will complete your program	
Start date for this year (dd/mm/yyyy)	
Finish Date for this year	
What job/career/occupation do you hope to have when you graduate	

***An official Academic Transcript is Mandatory**

INVOLVEMNT

Write a letter that describes the following:

1. Your educational and future plans
2. Your community, volunteer and student activities
3. Why you think you should receive this scholarship
4. Financial hardships you would experience by pursuing post secondary education/training

**DETERMINING FINANCIAL NEED – BUDGET
Residency while in School (Check all that apply)**

<input type="checkbox"/>	On my own	<input type="checkbox"/>	Student residence
<input type="checkbox"/>	With roommate(s)	<input type="checkbox"/>	Subsidized housing
<input type="checkbox"/>	With my parent(s)	<input type="checkbox"/>	Single with children
<input type="checkbox"/>	With spouse or common law partner	<input type="checkbox"/>	Out of province (indicate province) _____

EMPLOYMENT

Currently working (circle)	Full time	part time	occasionally	not working
Total summer earnings	_____			
While in school, I will work part time	Yes	no	not sure	

What other Scholarships/bursaries have you received?

Name of Award	Amount	Confirmed

Government assistance (Provincial student loans, Canada Student Loans, or other government assistance)

Have you applied or do you plan to apply for assistance for the upcoming school year?

___yes ___no If yes, please explain:

FINANCIAL REQUIREMENTS

Income	Expenses	Difference

Prior Student Loan(s)

Do you have a prior student loan? ____ yes ____ no If yes, please explain:

What is the total amount of all government student loans that you have outstanding? \$_____

DECLARATION AND CONSENT

I have read and fully understand the guidelines that govern the application and selection process and I have provided answers to all questions which apply to me.

I certify that all information contained on this form is truthful. I understand that any false statements intentionally given on this application, by email, or telephone will disqualify my application and will affect my ability to access future funding.

I hereby give consent to IWRC to use/publish my name and relevant information on IWRC's website, in IWRC brochure, in the local newspaper and/or in the IWRC Annual Report.

I will endeavour to attend the Award Ceremony if selected.

Applicant's signature

Date

SCHOLARSHIP GUIDELINES
INTERLAKE WOMEN'S RESOURCE CENTRE
ELEANOR MILNE SCHOLARSHIP

INSTRUCTIONS

- Read the application guidelines carefully before you complete the application form
- If you have any questions, please call the Interlake Women's Resource Centre by telephone at 204 642-8264

GOALS AND OBJECTIVES

The Interlake Women's Resource Centre wishes to assist women 18 YEARS of age or older, residing within the service area, in obtaining post secondary education in situations where the student is in need of financial assistance to pursue those studies.

The Eleanor Milne Scholarship was established in 2011 in memory of Eleanor Milne, past member, volunteer and advocate for the Interlake Women's Resource Centre.

APPLICATION DEADLINE

The deadline for submission of this application is **AUGUST 15TH** OF each year. Fully completed application packages must be post-marked by **AUGUST 15TH** in order to be considered.

TIMING/PROMOTION AND SELECTION OF SCHOLARSHIP RECIPIENT

- Advertisement for applications will be made in July of each year in the local newspaper and on the website www.iwrc.ca
- Application deadline is August 15th
- Applicants may be contacted for an interview before a selection is made
- Successful applicants will be notified, in writing

THE APPLICANT

- 1) Shall be a resident within the service area of the Interlake Women's Resource Centre Inc. (main communities include Winnipeg Beach, Gimli, Riverton, Fisher Branch, Arborg and Teulon)
- 2) Shall be attending a post-secondary institution and be facing a financial burden to pursue their academic studies
- 3) Shall provide proof of acceptance at a post secondary institution
- 4) Preference will be given to applicants who:
 - a) Can demonstrate involvement in community and volunteer service
 - b) Can demonstrate financial need
- 5) Shall provide current official academic transcript
- 6) Shall include two letters of reference, one from a teacher/professor and one from the community/volunteer sector

SUBMITTING THE APPLICATION PACKAGE

- Keep a copy of your application package for your personal records
- Application packages must be sent by mail, no faxes or emails
- Applications must be postmarked on or before the deadline of August 15th of each year to be eligible for Committee consideration
- Only fully completed applications will be considered

Forward all information to:
Interlake Women's Resource Centre Inc.
Eleanor Milne Scholarship
Box 1991, Gimli, MB ROC 1B0