



## **Julia Turnbull Leadership Scholarship**

DEADLINE: May 30

One scholarship awarded annually to cover the cost of tuition and renewable for up to 4 years to a Grade 12 student graduating from a Calgary High School (either Public or Catholic School District) admitted to a Canadian University studying in an area of his/her choice.

**CRITERIA:** School and community leadership, preferably involvement in student politics.  
An interest in volunteering internationally as described in a short essay.  
Financial need.  
Full-time enrollment (as defined by institution).

**APPLY TO:** Student Awards Coordinators, Calgary High Schools  
Julia Turnbull Leadership Scholarship, c/o Student Awards Administrator  
The Calgary Foundation  
700, 999 8<sup>th</sup> Street SW  
Calgary, AB T2R 1J5  
Fax: 403-802-7701  
Email: [studentawards@thecalgaryfoundation.org](mailto:studentawards@thecalgaryfoundation.org)



## Julia Turnbull Leadership Scholarship

### Application Form

**Personal Information (Please Print):**

Student #: \_\_\_\_\_ S.I.N.: \_\_\_\_\_

Name: Ms.  Mr.  Surname: \_\_\_\_\_ Given: \_\_\_\_\_

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

Postal Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Permanent Home Address: Same as above  or:

\_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Date of Birth: (mm/dd/yy): \_\_\_\_\_

Immigration Status: CANADIAN  PERMANENT RESIDENT  STUDENT VISA

Name and location of high school: \_\_\_\_\_

\_\_\_\_\_

Grade 12 Final Average \_\_\_\_\_ Attach a copy of your High School transcript.

For the upcoming year specify which post-secondary institution will you be attending.

Faculty: \_\_\_\_\_ Major: \_\_\_\_\_

Minor: \_\_\_\_\_ Degree: \_\_\_\_\_

In which session do you plan to be registered full-time: FALL  WINTER

If you will not registered full-time for both fall and winter, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Community Involvement, Civic Engagement, Volunteerism**

Please number and type your answers to the following questions on a separate page and attach to this application form:

1. In your schooling or in your community, what responsibilities have you taken on, what leadership responsibilities, what extra curricular activities?
2. Describe your volunteer activities. If you have an interest in volunteering internationally, please write a short essay (no more than 500 words) detailing this interest.
3. What are your personal interests and goals outside of the academic environment?
4. In which sports do you participate, or have you participated in the past, and at what level (recreational/competitive)?

**Financial Information:**

Marital status: Single  Married  Common-law  Separated  Divorced  Widowed

Date of separation or divorce (mm/dd/yy): \_\_\_\_\_

Number of dependent children: \_\_\_\_\_ Ages: \_\_\_\_\_

Are they residing with you? Yes  No

If you are, or intend to be married or living common-law in the upcoming year: Date of marriage or common-law (mm/dd/yy): \_\_\_\_\_

Name of spouse: \_\_\_\_\_ Occupation: \_\_\_\_\_

Net monthly income: \_\_\_\_\_

If spouse is a student, indicate spouse's net monthly earnings:

Summer: \_\_\_\_\_ During School Year: \_\_\_\_\_

How much do you expect to earn this summer? Net: \_\_\_\_\_

Number of weeks employed: \_\_\_\_\_

Estimated savings from summer employment: \_\_\_\_\_

If you are unable to work full time for the summer, give reasons why: \_\_\_\_\_



Where will you live during the four months prior to this September? Parents home  Other

Did you apply for a student loan for the upcoming year? Yes  No

Extenuating circumstances or additional comments: \_\_\_\_\_

Complete this budget for the academic year (Fall and/or Winter terms only). If married, or common-law, the budget should be for the whole family.

EXPENSES		RESOURCES	
Tuition and Fees	\$ _____	Savings as of start of academic year (exclude investments)	\$ _____
Are you a visa student? Yes <input type="checkbox"/> No <input type="checkbox"/>		Your expected part-time earnings during the academic year	\$ _____
Books and supplies	\$ _____	Investments -= Specify	\$ _____
Where do you plan to live while attending University? Parent's home <input type="checkbox"/> Other <input type="checkbox"/>		Scholarships/Bursaries (only those confirmed for the upcoming year)	
Estimated Living Costs: (including rent, food, transportation, utilities, clothing and personal expenses)		Specify	\$ _____
\$ _____/month x 8 months =	\$ _____	Contribution from parents	\$ _____
Child Care		Does this include a Registered Education Savings Plan? Yes <input type="checkbox"/> No <input type="checkbox"/>	
\$ _____/month x 8 months =	\$ _____	Contribution from spouse (net earnings during academic year)	\$ _____
Exceptional Expenses (Specify with amounts)		Other Income – Specify	
_____	\$ _____	_____	
_____	\$ _____	_____	\$ _____
<b>TOTAL EXPENSES</b>	<b>\$ _____</b>	<b>TOTAL RESOURCES</b>	<b>\$ _____</b>
TOTAL EXPENSES \$ _____ minus TOTAL RESOURCES \$ _____ = SHORTFALL \$ _____			



**PRIVACY AND CONSENT**

The Calgary Foundation respects your privacy. For detailed information regarding the Foundation’s privacy policy, please call 403-802-7716.

The information that I provided for this application is true, accurate and complete.

I am aware that providing incomplete or false information will be considered fraud and will affect my ability to access future funding.

I authorize The Calgary Foundation to access student information maintained by my high school and the post-secondary institution that I will and/or am attending for the purpose of determining and verifying eligibility for, and the general administration of the award(s) for which I have applied. I am aware that the granting of these awards is subject to conditions listed in my acceptance letter.

I authorize the Selection Committee to contact my references if needed.

I authorize The Calgary Foundation to distribute this application to the Selection Committee for review.

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

**CONSENT FOR PUBLIC RECOGNITION OF STUDENT AWARD RECIPIENT**

Signing this consent form permits The Calgary Foundation to publicly recognize the achievement of the student as a recipient of the award.

If selected for an award, consent is given to The Calgary Foundation to publish the student’s name, school location with award(s) received, future post-secondary plans and excerpts from answers to the essay question contained in the application form. This and celebrating 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, and yearbook for the purpose of recognizing student accomplishment(s). It is understood that not signing this consent will not prejudice the consideration of student award applications.

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

It is your responsibility to ensure that all relevant information has been included or attached. Incomplete applications may not be considered. Forward completed applications to, Scholarship Administrator, The Calgary Foundation, 700, 999-8th Street SW, Calgary, AB, T2R 1J5. Incomplete applications may not be considered.