

## Applications must be submitted by March 15 to:

Office of the Registrar, CM 301, Campion College, University of Regina, 3737 Wascana Parkway, Regina, SK S4S 0A2, or [Campion.Registrar@uregina.ca](mailto:Campion.Registrar@uregina.ca)

Inquiries: Philippe Mather, Awards Officer, 306-359-1229; Heather Antonini, Registrar, 306-359-1225

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### Instructions

- A. Complete the application form. The file can be either saved and emailed, or printed and delivered to the address above. (Note: Handwritten forms will NOT be accepted.) Please be sure to include any additional materials, such as letters of reference, if required.
- B. Select only the awards for which you meet the selection criteria and wish to be considered.
- C. Criteria for all awards can be found online at [www.campioncollege.ca/scholarships](http://www.campioncollege.ca/scholarships)
- D. Please be sure to complete only the sections required for the award(s) for which you are applying.

Students who are unable to register in the minimum credit hours stated in the scholarship's terms of reference due to a disability may be eligible for consideration if their maximum course load is specified and documented by a professional qualified to assess their ability. Students must be registered with, and their documentation provided to and verified by, the University of Regina's Centre for Student Accessibility at the start of each semester during which the student may be considered for a scholarship or bursary.

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### General Information:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Student Number: \_\_\_\_\_ Date of Birth (month/day/year): \_\_\_\_\_

High School: \_\_\_\_\_ Faculty: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

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

Declaration & Consent: I declare that the information I have provided in this application is accurate and complete. I understand that all information I have provided in connection with this application is subject to verification and audit by Campion College, and agree to provide supporting documentation to the College to verify my eligibility upon request. I understand that any funds I receive will be applied to my student account at Campion College at the University of Regina. I give permission to Campion College to release personal information given in this application to other educational institutions, and federal and provincial student loan offices to verify its completeness and accuracy. Should I be selected to receive an award, I grant Campion College permission to provide my name, award, program of study, year level and amount of my award to the donor of the award (if applicable), my high school guidance counselor, and to the Campion College Communication Office for publication and promotional purposes. My photograph may also be used for promotional purposes.

Yes, I have read and agree to the above terms and conditions.

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

**Selection of Awards:** (Please indicate with a check mark the award(s) for which you are applying.)

Award	Sections requiring completion
Dr. John M. and Regina Riffel Entrance Bursary	2, 3, 4
Harold J. Leibel Family Entrance Scholarship	2, 3, 4
Jesuit Fathers Entrance Bursary	2, 3, 4
Knights of Columbus, Conseil Langevin, Scholarship (Registration in a French course will be confirmed before scholarship is awarded)	2
Kramer Ltd. Foundation (South Saskatchewan Community Foundation) Scholarship *Additional letter of support required. See the description on the Entrance Scholarship page of the Campion College website for more information.	2
Kovacs Voice Entrance Scholarship	2, 4
Mary Volk Memorial Scholarship	2, 3
Paul and Carol Hill Scholars in Catholic Studies (Registration in the Catholic Studies program will be confirmed before scholarship is awarded)	2
Regina Archdiocesan Catholic Women's League Scholarship (Note: Mother of the applicant must be a member of the CWL.)  _____ CWL Member Name  _____ Council Name/#	2, 4
Saskatchewan Knights of Columbus Bursary (Note: Applicant, or their spouse or parent, must be a member of the Knights of Columbus or Columbian Squires)  _____ KofC Member Name  _____ Council Name/#	2, 3, 4
Stuart Lefebvre Memorial Bursary *Additional letter of support required. See the description on the Entrance Scholarship page of the Campion College website for more information.	2, 3, 4

## **Section 2 – Personal Statement**

(Provide information here regarding why you would be an appropriate recipient for the award(s) for which you have applied.)

### Section 3 – Statement of Financial Need

Name(s) of Parent(s) or Guardian(s): \_\_\_\_\_

Address (if different from applicant): \_\_\_\_\_

Occupation of Parent(s): \_\_\_\_\_

Number of Dependents in Family: \_\_\_\_\_

If you are married: Name of Spouse: \_\_\_\_\_

Occupation of Spouse: \_\_\_\_\_

Have you worked during the past year?  Yes  No

If "Yes": Name of Employer: \_\_\_\_\_

Type of Work: \_\_\_\_\_

Number of Hours:  More than 20 hrs/wk  Less than 20 hrs/wk  Other: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Income: \_\_\_\_\_

Total Accumulated Student Loans to Date: \$ \_\_\_\_\_

Other Debts: \$ \_\_\_\_\_ Monthly Payments: \_\_\_\_\_

Estimated Expenses for Fall and Winter Semesters	\$
Tuition and Fees	
Books	
Room & Board	
Recreation	
Transportation to and from classes	
Transportation Home to Regina and Return (if applicable)	
Other (please specify)	
<b>TOTAL EXPENSES:</b>	

Methods of Financing for Fall and Winter Semesters	\$
Parents/Guardians	
Relatives/Friends	
Spouse	
Savings	
Student Loans	
Other (please specify):	
<b>TOTAL REVENUE:</b>	

## Section 4 – Summary of Extra-curricular Involvement, Volunteer and Community Service

Volunteer/ Community Service				
Role/Position	Organization	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Hours per Day/Wk/Mth

Extra-Curricular Involvement (i.e. Student associations, clubs, sports, etc.)*				
Activity/Position	Association/ Team/ Group	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Hours per Day/Week/Mth

\*Please do not include paid positions.