

APPLICATION FORM

MATTINSON SCHOLARSHIP PROGRAM FOR STUDENTS WITH DISABILITIES Administered by the Association of Universities and Colleges of Canada 2012-2013

Please identify your primary permanent disability (check one):

☐ Physical Disability ☐ Sensory Disability ☐ Mental Health Disability ☐ Learning Disability

1. APPLICANT INFORMATION			
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Last Name:		First Name and Middle Initial:
Permanent Address:			
Apt.:		No. and Street:	
City:		Province:	Postal Code:
Telephone No.:		E-mail (AUCC will use this information as point of contact. Please add awards@aucc.ca to your safe senders in your junk email options):	
Are you a Canadian citizen or a permanent resident?			Yes <input type="checkbox"/> No <input type="checkbox"/>
2. GUIDELINES			
I have read the scholarship guidelines and understand the eligibility requirements for this scholarship program.			YES <input type="checkbox"/> NO <input type="checkbox"/>
3. SCHOLASTIC DATA			
In chronological order, list the educational institutions attended during your last two academic years.			
Name of School:		From/To:	Grade Completed:
4. POSTSECONDARY DATA			
Name of educational institution you plan to attend during the 2012-2013 academic year:			Campus and City:
Start Date of Studies: Month _____ Year _____		Degree sought during the 2012-2013 academic year: <input type="checkbox"/> Bachelor's degree	
Proposed Field of Studies:		Maximum Length of Postsecondary Program:	
5. OFFICIAL TRANSCRIPT OF RECORD			
Provide an official transcript of the last three semesters of available marks, that is, <u>marks for the period of September 2010 to December 2011.</u>			

6. LETTERS OF REFERENCE

Please provide two signed letters of reference; one from a teacher (academic) and one from a person familiar with your volunteer/community involvement and/or extracurricular activities (refer to the last page of this application).

7. PROOF OF DISABILITY

Please provide a proof of disability in one of the following forms: medical certificate, documentation showing receipt of federal and/or provincial disability assistance, or a letter signed and on a letterhead, confirming the permanent disability from an official from the institution's centre for students with disabilities.

8. VOLUNTEER/COMMUNITY INVOLVEMENT AND/OR EXTRACURRICULAR ACTIVITIES

On a separate page, describe your volunteer/community involvement and/or extracurricular activities over the past five years (**please limit your answer to a maximum of 250 words**).

9. VOLUNTEER/COMMUNITY INVOLVEMENT AND/OR EXTRACURRICULAR ACTIVITIES

The following list is to be used to record each of the activities you wish to be considered for the scholarship program.
Additional copies of this page can be attached if more than three activities are to be considered.

ACTIVITY DETAILS

ORGANIZATION	ROLE	DATES	TOTAL HOURS FOR PERIOD	PAYMENT RECEIVED	PART OF MANDATORY SERVICE REQUIREMENT
	<input type="checkbox"/> Leader <input type="checkbox"/> Organizer <input type="checkbox"/> Participant	From: To:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

DETAILS OF ROLE, ACTIVITIES AND ACCOMPLISHMENTS

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	<input type="checkbox"/> Leader <input type="checkbox"/> Organizer <input type="checkbox"/> Participant	From: To:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

DETAILS OF ROLE, ACTIVITIES AND ACCOMPLISHMENTS

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10. APPLICANT CONSENT

The Association of Universities and Colleges of Canada ("AUCC") administers the Mattinson Scholarship Program for Students with Disabilities. This administration role includes the application process, the evaluation and selection process, the processing of recipients' files and the administering of payments for the Mattinson Scholarship Program for Students with Disabilities. The purpose of this statement is to set out AUCC's commitment to the protection of personal information collected, used or disclosed in performing this function. The AUCC will comply with the requirements of the Canadian Personal Information Protection and Electronic Documents Act (PIPEDA) for the collection, use and disclosure of personal information provided by you in the course of your scholarship application.

The AUCC has appointed a Privacy Officer with overall responsibility for AUCC privacy compliance. Should you have any questions, concerns or complaints regarding the privacy of your personal information please contact the Privacy Officer by calling (613) 563-1236 or by writing to: Privacy Officer at 600-350 Albert Street, Ottawa, ON K1R 1B1.

Please find below a summary of the AUCC's privacy policies concerning the collection, use and disclosure of the personal information you will be submitting in this application. Please read the information below carefully **as by submitting your application you are consenting to the collection, use and disclosure of your personal information as summarized below**. A full version of the AUCC Privacy Code which outlines the AUCC's complete personal information management practices, policies and procedures is available on line at www.aucc.ca or by requesting a copy from the AUCC Privacy Officer.

PURPOSE OF COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

Your personal information is being collected for the limited purposes of processing and evaluating scholarship applications, selecting and processing scholarship recipients and administering scholarship payments once awarded. Your personal information will be collected from you and may also be collected from references, secondary and postsecondary educational institutions, government, community or other sources based on the information provided by you in this application. This process will include the release of your personal information to the Selection Committee members as well as any other third parties where such release is necessary for scholarship evaluation, selection and administration purposes. There will be no other uses or disclosures of your personal information by the AUCC unless required or authorized by law. The personal information being collected in the application is limited to only that information which is necessary for the full consideration of your scholarship application.

PROMOTION PURPOSES FOR RECIPIENTS

AUCC may from time to time wish to announce scholarship winners, their current educational institution, the university or college where they intend to study and the course of study funded by the scholarship, as well as the amount of the scholarship, or to use or disclose recipient information for promotional purposes. AUCC shall be responsible for obtaining the consent of recipients for such purposes.

ACCESS TO AND ACCURACY OF YOUR PERSONAL INFORMATION

Upon request to the AUCC Privacy Officer, you will be given access to your personal information held by the AUCC. The AUCC will, on request, correct inaccuracies in your information. Please be advised that inaccuracies must be brought to the attention of the AUCC prior to the selection of a scholarship recipient[s] in order for us to record and bring the correction to the attention of the Selection Committee.

RETENTION OF PERSONAL INFORMATION

The AUCC will securely retain personal information about applicants only for the time necessary to complete the assessment and evaluation, to select a recipient, to administer the scholarship payments, and for a reasonable period thereafter. At the end of this period the AUCC will destroy, erase or render anonymous, any of your personal information in their possession. The AUCC will retain a permanent listing of the names and internal identification numbers of the recipients of the scholarship program in any given year.

CONSENT

You may refuse to provide personal information to us. You may also withdraw your consent at any time, subject to legal or contractual restrictions and reasonable notice. However, in either case, this may limit your scholarship eligibility and our ability to administer the scholarship payments. **By completing and signing [submitting] this application you are acknowledging the accuracy of all information in the application package and you are consenting to the collection, use and disclosure of your personal information for the above stated purposes.**

Date:

Signature of Applicant:

11. AUTHORIZATION FOR THE DISTRIBUTION OF PERSONAL INFORMATION

In compliance with Privacy Law, personal information about your application will not be released except where such release has been specifically authorized by you. Third parties (parents, guardians, etc.) may contact AUCC on your behalf, in person, by phone, or by email, to receive information about your application only if you have authorized this in advance.

In the spaces below, provide the names of up to two parties to whom AUCC may release your personal information. Please also provide a password for their use when contacting AUCC. Information about your file will be given only to those individuals who have been named below and who can provide this password. It is your responsibility to ensure the parties named below are aware of the password you have provided AUCC.

Note: this password will not work with your online account. Your AUCC ID and online account password to verify the status of your application will be mailed to you at a later date.

Parties who may have access to your information:

Name:	Password:
Name:	
Date:	Signature of Applicant:

12. DECLARATION

I certify that all information provided in this application form and attached document is true and accurate to the best of my knowledge. I understand that acceptance of this application or receipt of any scholarship/award issued to me may be revoked without notice if any information in this application is subsequently found to be false.

Name printed :	Date :
Signature of Applicant:	

13. CANDIDATE'S CHECKLIST

Please provide the following supporting documentation with the application form:

- ☐ An **official** transcript of the last three semesters of available marks, that is, marks for the period of September 2010 to December 2011.

NB: A transcript is considered *acceptable* only if it meets the following criteria:
1- It is presented on the official paper of the institution.
2- It bears the appropriate signature and/or seal of the institution.

- ☐ Two signed letters of reference with the references' original signatures.
- ☐ A description of your volunteer/community involvement and/or extracurricular activities.
- ☐ The list of activities related to your volunteer/community involvement and/or extracurricular activities.
- ☐ A *proof of disability* as indicated in the guidelines.
- ☐ Postmarked application must be sent to the AUCC on or before **MAY 15, 2012**.

IMPORTANT: You are responsible for ensuring that the post office postmarks your envelope by the due date.

Please send it to the:

Higher Education Scholarships
Association of Universities and Colleges of Canada (AUCC)
Ref: Mattinson Scholarship Program for Students with Disabilities
600-350 Albert Street
OTTAWA, ON K1R 1B1
Tel.: (613) 563-1236
Fax: (613) 563-9745
E-mail: awards@aucc.ca

14. IMPORTANT DATES

May 15, 2012	Deadline date to send your application form to the AUCC.
May 2012	You will receive an acknowledgement of your application.
June 1, 2012	Deadline for receipt of supporting documentation.
Mid-July 2012	Meeting of the Selection Committee.
August 2012	All candidates will receive notice in writing of the results of their application. Results will not be communicated by telephone or email.
Sept. 14, 2012	Deadline date for winners to accept their scholarship.

MATTINSON SCHOLARSHIP PROGRAM FOR STUDENTS WITH DISABILITIES

LETTER OF REFERENCE - GUIDELINES

IMPORTANT: **A COPY OF THESE GUIDELINES IS TO BE GIVEN TO THE PERSON WHO WILL WRITE YOUR LETTER OF REFERENCE.**

You have been asked to write a letter of reference on behalf of a student applying for the Mattinson Scholarship Program for Students with Disabilities. The applicant has been asked to submit two letters of reference written by individuals in support of their academic achievement and volunteer/community service and/or extracurricular activities (i.e. professor, volunteer supervisor). The reference cannot be related to the applicant. To assist you in the preparation of this letter, please refer to the instructions and information below.

These scholarships are awarded to applicants for postsecondary studies, in any chosen field, at recognized educational institutions. The scholarships are awarded on the basis of academic achievement and volunteer/community service and/or extracurricular activities.

Academic reference letters

If you are providing an academic reference, please state the length of time and the capacity in which you know the applicant. Your letter of reference should also concentrate on the potential the applicant has to excel in postsecondary studies.

Volunteer/community service and/or extracurricular activities reference letters

If you are providing a volunteer/community service and/or extracurricular activities reference letter, please state the length of time and the capacity in which you know the applicant. Describe their role, their activities and their accomplishments and how their service has impacted the organization or community. In addition, please indicate if the applicant demonstrated exceptional leadership, extraordinary effort and ability to overcome adversity.

The letter should be given directly to the applicant so that it may be included with their application. **Please ensure that the letter is typewritten on letterhead, signed and includes your contact information.** The student would appreciate a prompt response as the deadline for application is **May 15, 2012**.

Thank you very much for taking the time to support a Mattinson Scholarship Program for Students with Disabilities candidate and contributing to a fair selection process.