

Tim Hortons
SOUTHSIDE SHUFFLE
THE ANNUAL PORT CREDIT BLUES & JAZZ FESTIVAL

SCHOLARSHIP APPLICATION
Application Deadline June 30th

The Southside Shuffle is pleased to offer a \$1,000 scholarship to support and encourage Southside Shuffle student volunteers to in their post-secondary education. The scholarship will be awarded for full-time post-secondary or undergraduate studies in an academic program towards a diploma or degree in a recognized College or University for the Fall/Winter semester.

ELIGIBILITY

Applicant must:

- Be an Ontario resident.
- Be entering or returning as a full-time undergraduate degree program or college program, at a qualifying institution in the year of application.
- Submit a copy of the Letter of Acceptance and receipt of payment to the institution.
- Copies of transcripts of latest marks (please provide last year of secondary and all years of post-secondary if applicable)
- Transcripts or letters of acceptance that are not available before June 30th may be forwarded to the administrator by no later than August 15th and will be added to the application, however the application must be submitted by June 30th.
- Final decisions will be based on the complete package.
- Complete the scholarship application and any supporting documentation.
- Include the signed Consent form.
- Submit a short essay (no more than 500 words) on what you learned by volunteering at the Festival, how it made you a better person, and why other students should consider volunteering at the Festival. Your essay may be used as a testimonial on our website.
- Be a returning volunteer with the Festival (a minimum two years volunteering with The Southside Shuffle or in the 2nd year of volunteering with the Festival.)
- Complete the Biography

EVALUATION PROCESS

All names and identifying information will be struck from the eligible applications and will be assigned a number to ensure that the applicant is kept anonymous from those whom will select the winner. The announcement of the winner will be made at the Volunteer Appreciation Party post festival. All eligible applicants will be advised of the date and location of the Volunteer Appreciation Party. The Scholarship will be paid when proof of enrollment and receipt of payment to the institution is presented to the administrator.

If not attending the Volunteer Appreciation Party, the winning recipient will be contacted the week following the appreciation party.

All applications and supporting documents should be marked CONFIDENTIAL and sent to:

ATTENTION: Administrator Scholarship Fund
SOUTHSIDE SHUFFLE BLUES & JAZZ FESTIVAL SCHOLARSHIP FUND
R92 Lakeshore Rd E Suite 217, Mississauga, ON L5G 4S2
sssvolunteers@hotmail.com

Application Form

PERSONAL INFORMATION:

Name: _____

Address: _____
House # Street City Province Postal Code

Email Address: _____

Phone Number: _____

Date of Birth: _____

Social Insurance# _____
for tax purpose

School Presently Attending: _____

College/University you are enrolled in/attending: _____

Major Area of Study/Program: _____

Level Attending _____ Commencement Date: _____

I hereby certify that the information furnished in this application is true and complete. I understand that if information is found to be incorrect, this applicaiton may be rejecgtd and/or an award may be revoked. Decisions of the Board Scholarship Fund Committee are final and I release and discharge the members of such committee and Board from any liability or obligation owed to me in respect of this applicaiton and it's consideration.

Signature of Applicant

Date

Parent/Guardian Signature
(if applicant is under 18)

Date

Assigned Number: (office use only) _____

SCHOLARSHIP APPLICANT CONSENT

Privacy of the personal information you have supplied on your Scholarship Application is an important part of the evaluation required to ensure the integrity of the Scholarship Program and the standards of the Board. We are committed to collecting, using and disclosing your personal information responsibly.

Both the Scholarship Committee and the Administrator of the Scholarship Fund who come in contact with your personal information are aware of the sensitive nature of the information you have disclosed to us. They have all been apprised in the appropriate uses and protection of your information.

The Administrator and/or Scholarship Committee members will collect use and disclose the information you have provided on your application for the following purposes:

1. to determine your eligibility for a scholarship award based on the information you have provided.
2. storage, retention and destruction of your personal information complies with existing legislation and privacy protection protocols.

By signing your consent, you have agreed that you have given your consent to the collection, use and/or disclosure of your personal information and your supplied references for the purpose of adjudicating your application for a Scholarship Award.

CONSENT

I have reviewed the above information that explains how the Board will use my personal information, and the steps that the Board is taking to protect my information.

I agree that the Scholarship Fund Administrator and/or Scholarship Fund Committee can collect, use and disclose personal information about

_____ (please print your name) as set out above in the information about the Scholarship Fund Privacy Policy.

Signature

Print Name

Parent/Guardian Signature
(if applicant is under 18)

Print Name

Date

Signature of Witness

BIOGRAPHY

(attach another sheet if more room is required)

For office use only: # _____

A. Secondary Education:

- | | | | | | |
|----|---------------------|------|----------|-----------------|-----------------|
| 1. | Name of High School | City | Province | Graduation Date | Grade Completed |
| 2. | Name of High School | City | Province | Graduation Date | Grade Completed |

B. Proposed Post-secondary Studies:

- | | | | |
|----|---------------------|----------|--|
| 1. | Name of Institution | Location | Entry Date |
| | Program | Major | Level (e.g. 1 st year, graduate etc.) |
| 2. | Name of Institution | Location | Entry Date |
| | Program | Major | Level (e.g. 1 st year, graduate etc.) |
| 3. | Name of Institution | Location | Entry Date |
| | Program | Major | Level (e.g. 1 st year, graduate etc.) |

C. Academic Achievements:

Attach latest transcripts and list any awards including supporting documentation):

D. Extracurricular Activities:

List sports, hobbies, interests, special skills etc:

E. Awards and Honors:

For office use
only:

List any awards or honours received in any field (include supporting documentation):

F. Volunteer Work:

Please indicate your volunteer work that was part of the 40 hours of mandatory community service required to achieve your Secondary School diploma.

2. Company/Organization Name:

Job Description / Activity _____

Duration of Work (i.e. # hours per week/month/year and for how long):
_____ Were you paid? _____

Reference (name and phone number): _____

Additional Voluntary Work and/or Community Service:

1. Company/Organization Name:

Job Description / Activity _____

Duration of Work (i.e. # hours per week/month/year and for how long):
_____ Were you paid? _____

Reference (name and phone number): _____

3. Company/Organization Name:

Job Description / Activity _____

Duration of Work (i.e. # hours per week/month/year and for how long):
_____ Were you paid? _____

Reference (name and phone number): _____

For office use
only:

G. Work Experience:

1. Company/Organization Name:

Job Description / Activity _____

Duration of Work: (i.e. # hours per wk/month/year): _____

Reference (name and phone number): _____

2. Company/Organization Name:

Job Description / Activity _____

Duration of Work: (i.e. # hours per wk/month/year): _____

Reference (name and phone number): _____

3. Company/Organization Name:

Job Description / Activity _____

Duration of Work: (i.e. # hours per wk/month/year): _____

Reference (name and phone number): _____

H. List any other information or explanation that you feel may assist the committee in judging your application for this scholarship:

