

Hugh McRoberts Secondary School School Scholarship Program

APPLICATION FOR NOMINATION CONSIDERATION SCHULICH LEADER SCHOLARSHIP

Please note: The school may nominate one (1) candidate for the Schulich Leader Scholarship.						
NAME:	PUPIL #:					
PHONE #:	EMAIL:	·				
graduating class. It should be se	omeone who demon	epreneurial-minded STEM student in the strates academic excellence, leadership, only nominate one candidate.				
	Eligibility:					
Please check that the following apply:						
☐ I will graduate in June 2023						
☐ I am attending McRoberts full ti	me (minimum 6 courses)					
I am a Canadian citizen or perr	manent resident					
I am a BC resident						
☐ I have excellent Grade 11 and	12 marks (minimum 90% c	average in academic courses)				
☐ I am planning to study full-time	at a post-secondary instit	ution				
☐ I have financial need						
I am entrepreneurial-minded						
I plan to enrol in STEM at one of https://www.schulichleaders.co		heck online at				
I am planning to pursue a cared and business enterprise, applied		areas: technology, engineering, entrepreneurship				
I am NOT planning a career as	a medical practitioner					
I understand that this is for a not form, which is due February 23,	-	ninated, I still need to complete an application				
I have attached my grade 11 a	and grade 12 record of mo	irks (Semester 1 marks for Grade 12)				

ACTIVITY SHEET

Provide a summary of your involvement below. The contact person should be somebody who can speak to and verify your community involvement. **An activity should only be listed once below.**

NOTE: Does not include hours completed for a course i.e., CPWE, Grad Transitions, Human Services, Peer Helping

• EXTRA-CURRICULAR ACTIVITIES (Over the last 3 years – including grade 10, 11 and 12 only)

	<u>DESCRIPTION</u> (Role/Duties)	DATES & FREQUENCY	TOTAL HOURS	CONTACT PERSON	PHONE #
EX.	Student Council, General Member	Sept 2019-2020 2hrs/week	80 hrs	Jane Doe	778-555-5555
1.					
2.					
3.					
4.					
5.					
COMN	MUNITY/VOLUNTEER SERVICE (For	Grade 10, 11 and 12	only)		
	DESCRIPTION	DATES &	TOTAL	CONTACT	PHONE #
	(Role/Duties)	FREQUENCY	HOURS	<u>PERSON</u>	
EX.	Richmond Hospital, Gift Shop Cashier	Nov 2017 – Feb 2018 2hrs/week	30 hrs	Jane Doe	778-555-5555
1.					
2.					
3.					
4.					
5.					
COMN	MUNITY EXTRA-CURRICULAR ACTIV	ITIES (Community Sp	orts, Fine Ar	ts, Youth Groups, et	c.)
	DESCRIPTION (Role/Duties)	DATES & FREQUENCY	CON	NTACT PERSON	PHONE #
EX.	Richmond Minor Hockey, Player	Sept 2014 – Mar 2017 6 months/year		John Doe	604-555-5555
1.					
2.					
5.			_		

LEADERSHIP ROLES (For Grade 10, 11 and 12 only) DESCRIPTION DATES & TOTAL CONTACT PHONE # (Role/Duties) FREQUENCY HOURS PERSON EX. Richmond Hospital, Gift Shop Cashier Nov 2017 – Feb 2018 30 hrs Jane Doe 778-555-5555 2hrs/week 1. 2. ______ 5. • WORK EXPERIENCE (For Grade 10, 11 and 12 only) **DESCRIPTION** CONTACT PERSON **DATES** PHONE # 1.

FUTURE PLANS:				
Indicate which university/unive	ersities you are planning to attend:			
First Choice:	Second Choice:			
In what program do you plan t	o enroll?			
After post-secondary study, what type of employment do you hope to attain:				
Where do you see yourself in 10 year	rs?			

Completed forms must be submitted online to Mr. Li by January 13th, 2023 @ noon. Please attach a copy of your grade 11 & 12 Marks or Transcript.