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SILVER ANNIVERSARY SCHOLARSHIP APPLICATION

The guidelines listed on the reverse of this form will be used as part of the process for the approval and acceptance of all applications; please read them carefully before filling out and submitting your application. Completed applications should be sent to the Saskatoon HSAS office.

PLEASE PRINT

Section I - Member Information

Name of Member Sponsoring This Application: _____
Last First Initial

Address: _____
Street/Box No. City/Town Postal Code

Telephone: _____
Home Work

Relationship to Student: _____

Union Region # of Employment: _____ Profession: _____

Section II - Student Information (Spouse or Dependent of Member)

Name of Student: _____
Last First Initial

Address: _____
Street/Box No. City/Town Postal Code

Telephone: _____
Home Work

Date Of Birth: _____

Section III - Program Information

Period of Study Student Will Be In Full-Time Attendance and For Which Assistance Is Being Requested:
_____ / _____ To _____ / _____
Month Year Month Year

Institution Student Will Be Attending: _____

Institution Address: _____
Street/Box No. City/Town Postal Code

Diploma/Degree/Certificate Expected: _____
Expected Date Of Completion: _____ What Year Of Program Will Student Be Entering? _____

We Certify That The Above Information Is True And Correct. We Hereby Authorize The Health Sciences Association Of Saskatchewan to Validate Any Of The Aforementioned Information If Required.

Member's Signature Date

Student's Signature Date

Completed applications must be received in the Saskatoon HSAS office no later than October 15th.

Section IV - Office Use Only

Date Became An HSAS Member: _____

Amount Awarded: _____

Date Awarded: _____

APPLICATION GUIDELINES

Who is Eligible?

- Spouse or dependent of an HSAS Member. The spouse or dependent must be enrolled in full-time studies at a post secondary educational institution leading to a degree, diploma or certificate.
- In order for an application to be considered, the HSAS Member must be a member in good standing of the union for a minimum of twelve (12) months prior to the date of the application.

Application Procedure

- An HSAS Member may submit one (1) application per year for either a spouse or a dependent.
- Application forms must be received at the Saskatoon HSAS office no later than October 15th, and a copy of the tuition receipt must accompany the application form.
- No confirmation of receipt of application will be sent.

Required Documentation

- Application Forms: Only an original application form, or a PDF scanned copy will be accepted.
- Receipts: Originals or copies may be submitted. These may be submitted by mail or in person.
- **NO FAXED COPIES WILL BE ACCEPTED.**

Selection Procedure

- Forty (40) \$500.00 scholarships will be awarded on a lottery system.
- A maximum of one (1) scholarship per member per draw will be awarded.

Scholarship Award

- Successful applicants will be notified within 1 week following the application deadline and awarded their scholarships.
- The names of successful applicants will be posted on the website, www.hsas.ca.

Administration

- Responsibility for conducting the lottery and resolving any disputes in regard to eligibility or interpretation of these guidelines rests exclusively with the Finance Committee whose decision is final and binding.
- These guidelines may be added to, changed or amended at any time upon authorization by Executive Council.

Personal Information

HSAS will only use and disclose the personal information collected in connection with this application for the purposes of evaluating and processing the application, validating the information provided and any other purpose as required by law. HSAS reserves the right to publicize the details of any scholarship granted, including the name of the recipient. For other information about privacy policies of HSAS, see our web site, www.hsas.ca, or contact our office.