



SASKATCHEWAN SIMMENTAL ASSOCIATION
SCHOLARSHIP APPLICATION FORM

ADMINISTRATION AND REGULATIONS

1. The Saskatchewan Simmental Association, whose interpretation of the Regulations will be final, will administer the Scholarship Plan.
2. Applicants or their parents must be paid up members of the Saskatchewan Simmental Association and have been for no less than one year from the date of the application deadline.
3. The scholarship will be for one academic year, in an amount of up to \$1000.00 and paid directly to the successful applicant. There are no restrictions on the amount or number of scholarships held or the number of times a student may apply. The Saskatchewan Simmental Association reserves the right to alter or discontinue the Scholarship Plan at any time.
4. Qualifying Educational Institutions are: Canadian and Foreign Universities and Colleges recognized by the Association of Canadian Universities and Colleges and Canadian Community Colleges including Institutions of Technology and similar Institutions controlled by or under the supervision of Provincial Departments of Education.

A. GENERAL INFORMATION

Name of Applicant: _____
Address: _____
City: _____ Postal Code: _____
Phone No: _____ Email: _____
Date and Year of Birth: _____

B. EDUCATION AND CAREER INFORMATION

- 1) What level of education are you presently enrolled in? _____
- 2) Post Secondary Educational Institution you plan to attend _____
Program you plan to attend? _____
What year will you attend this program? _____
- 3) Have you currently received any other scholarships and /or bursaries? If so, please list the source and the amount. _____

C. FINANCIAL NEED

- 1) To what extent are you financially dependent on your parent(s)/guardian(s)?
Wholly ____ Partially ____ Not at all ____ If "partially" or "not at all", please explain: _____

2) Applicants estimated annual expenses:

Tuition fees	_____
Room & Board	_____
Books	_____
Travel	_____
Personal & Other	_____
TOTAL:	_____

3) Method of Financing:

Personal Savings	_____
From parents/guardians	_____
From friends & relatives	_____
Spouse's earnings (if applicable)	_____
Scholarships, bursaries, loans, etc.	_____
Other sources	_____
TOTAL:	_____

D. Y.C.S. INVOLVEMENT

- 1) Are you currently a YCS Member? _____
- 2) Are you currently a 4-H Member? _____
- 3) Outline your previous involvement in the YCS and 4-H programs. _____

- 4) Outline your involvement in your community. _____

E. DECLARATION OF APPLICANT

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT

DATE	SIGNATURE OF APPLICANT	SIGNATURE OF WITNESS
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**COMPLETED APPLICATION FORM (Please type or print)
MUST BE RECEIVED BY OCTOBER 1**

Send completed forms to:
 Saskatchewan Simmental Association
 Box 591 Grenfell, SK S0G 2B0
 Fax (306) 697-2942 or email to sasksimmental@yourlink.ca