

Insert School Logo

(must be pdf or vector format)

Insert School Name

The Louise McKinney Post-Secondary Scholarship recognizes and rewards students for their academic achievements and encourages them to continue in their undergraduate or professional program of study.

### Eligibility Criteria

Applicants must:

- be a Canadian citizen, Permanent Resident or Protected Person (visa students are not eligible),
- be an Alberta resident, and to be considered an Alberta resident one of the following conditions must apply:
  - one parent, or legal guardian has maintained permanent residence in Canada for at least 12 consecutive months immediately prior to commencing post-secondary studies and be residing in Alberta, or
  - Alberta is the last place the student has lived for twelve (12) consecutive months immediately prior to commencing post-secondary studies, or
  - the student's spouse/partner has maintained permanent residence in Alberta for 12 consecutive months prior to the person attending post-secondary,
- be enrolled full time in the second or subsequent year of an undergraduate or professional program at a publicly-funded post-secondary institution in Alberta,
- be in satisfactory academic standing as determined by the post-secondary institution.

Students are **not eligible** for a Louise McKinney Scholarship if they:

- have been nominated for a Jason Lang Scholarship in the same academic year,
- are in a graduate program,
- are an apprentice, or
- are upgrading.

### Selection Process

Selection is based on academic standing. There are a limited number of scholarships available to each school and application deadlines vary by school.

#### Alberta Student Number (ASN)

Your Alberta Student Number is on your Alberta Transcript for High School Achievement.

If you do not know your ASN, or do not have an ASN:

- Visit [learnerregistry.ae.alberta.ca](http://learnerregistry.ae.alberta.ca) for instructions.
- Call toll-free in Alberta at 310-0000 to have a Request for ASN form mailed to you. Due to privacy issues, ASN's will not be given over the phone.

#### Deadline and How to Apply

**Application Deadline:**

**Submit application to:** Post-Secondary Institution Student Award Office

**Payment:**

Contact:

**Insert School Logo**

(must be pdf or vector format)

**Insert School Name**

**FOIP Collection Notice or Personal Information Protection Act (PIPA) Notice**

(Schools must provide FOIP or PIPA collection notices, as required)

**Personal, Citizenship and Residency Information**

Last Name (*current legal name*)

First Name (*current legal name*)

Middle Initial

Apartment or Box Number

Street Address (add direction, e.g. S, NW, SE, if applicable)

City/Town

Prov/State

Country

Postal/Zip Code




Mobile Number (format: 999-999-9999)

Telephone Number (format: 999-999-9999)

Gender:  Male  Female

X Choose X if you do not identify as male or female, or choose to self-identify as X.

Previous Last Name (*if applicable*)

Email Address (mandatory)

**Indigenous Status:**  Status Indian/First Nations  
 Non-Status Indian/First Nations  
 Métis  Inuit  Not applicable

Providing personal information on Indigenous students will help measure the effectiveness of student financial assistance programs in relation to Indigenous students and to research programs and services to improve student success rates. If you wish to declare your Indigenous heritage, please check the box that applies to you.

**NOTE: This is mandatory for awards which require Indigenous status as part of the eligibility, voluntary otherwise.**

Social Insurance Number

Birthdate

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Alberta Student Number (mandatory)

**Citizenship Status: (check one)**

- Canadian  
 Permanent Resident  
 Protected Person\*

**\*If you are a Protected Person, including Convention Refugee, you must submit:**

- A copy of your Social Insurance Number card **AND**
- A copy of **one** of the following:
  - Notice of Decision, or
  - Verification of Status Document (VOS)

The documentation must be valid on your Program of Study Start Date.

**Alberta Residency:**

Did you or one of your parents or legal guardian live in Alberta for at least 12 consecutive months immediately prior to commencing post-secondary studies? (Do not include time attending post-secondary studies or vacations.)

Yes  No

**If no,** has your spouse/partner maintained permanent residence in Alberta for 12 consecutive months prior to you attending post-secondary.

Yes  No

**Post-Secondary Institution Enrolment Information**

Post-Secondary Institution Name

Student ID

Address

City/Town

Prov/State

Country

Postal/Zip Code

Program of Study

Level of Study: (check one)

Undergraduate

Professional Program (e.g. medicine, veterinary medicine, optometry, etc.)

Program of Study Start Date

Month	Year
<input type="text"/>	<input type="text"/>

Anticipated Date of Completion

Month	Year
<input type="text"/>	<input type="text"/>

Program Length

Years  Months

Year of Program

Expected Credential (e.g. upgrading, transfer, degree, diploma, certificate, other)

**Declaration of Applicant**

**I have read and understand the instructions, and declare that:**

- all information provided is true and complete and I understand it is subject to verification.
- I will immediately notify \_\_\_\_\_ (School Name) \_\_\_\_\_ if there are any changes to the information I have provided in this application.

(School may insert any additional required text below regarding any further declarations deemed required by the school)

- I authorize my post-secondary institution to disclose information collected on this application form, my program of study and any award details (if I am selected) to Alberta Student Aid, and I authorize Alberta Student Aid to collect this information from the post-secondary institution for the purposes of administering the Louise McKinney Post-Secondary Scholarship under the *Heritage Scholarship Act*, including confirming my eligibility and suitability for this award, for program evaluation and for research and statistical analysis.

Signature of Applicant

Today's Date

Alberta Student Number (mandatory)

*x SIGN HERE*

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Please review your application to make sure you have completed all the required fields and that the information is accurate.**

**Incorrect or incomplete information will delay processing.**

**Your application and all supporting documentation must be received by the application deadline.**