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Vegreville, AB T9C 1S6
Phone: (780) 632-6112
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Scholarship Application

Personal Information:

Alberta Student Number

Social Insurance Number

Last Name (Current Full Legal Name)

First Name & Initial (Current Full Legal Name)

Mailing Address

Phone Number

City/Town

Province

Country

Postal Code

Birthdate (dd/mm/yyyy)

Email address

Are either of your parents, grandparents, or legal guardians, a member in good standing of Lakeland Power Co-op?

Yes

No

Name of Parent/Grandparent/Legal Guardian
(Member)

Lakeland Power Co-op Account Number

Citizenship:

Canadian Citizen **OR** Permanent Resident (Landed Immigrant)

(Note: Landed immigrants must include a photocopy of their immigration form, Visa students are not eligible)

Alberta Residency:

Do your parents/grandparents currently live in Alberta? (Circle one) Yes No

Did your parents/grandparents live in Alberta while you were in high school? (Circle one) Yes No

Proposed Post-Secondary Studies:

Name of Institution

Name of Program Enrolled in (must provide proof of enrolment)

Entry Date for Program

Length of Program

Secondary Education:

Name of High School

Town/City

Province

Date of completion of High School (mm/yy)

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 audit;
- I have attached all requirements as per the Application Guidelines.
- I will be a student at the institution named for the period; and
- I will immediately notify Lakeland Power Co-op in writing if I withdraw from studies before completing one semester of studies.

I authorize Lakeland Power Co-op to release my name and program of study if I receive a scholarship.

Signature of Applicant

Date