Environment Canada Scholarship for Academic Excellence

Awarded to UofT Mississauga students completing Year 2 of a Specialist or Major Environment Program and who have demonstrated academic achievement in environment related courses and exceptional leadership and commitment on behalf of the environment either on campus or in the community

Applicant Information

Surname     First Name     Student Number

Checklist:

- Registered at UofT Mississauga in Year 2 of an Environment Program (minimum 8.5 credits completed at the end of 2017-2018 Fall/Winter Session)
- Have attained high academic standing – special attention will be given to environment-related courses.
- Attached a 1-2 page summary of campus and/or community involvement demonstrating leadership in environment-related activities. Outline that includes:
  - Each organization or activity (name, address, etc.)
  - Your participation/involvement within each organization/activity
  - Total hours or average hours per week
  - Months and/or Years of your direct involvement
- Attached a ½ -1 page statement of how you have demonstrated exceptional leadership and commitment on behalf of the environment either on campus or in the community
- Completed Application, Reference and Declaration Pages
- Submit to the Office of the Registrar UofT Mississauga, Room 1235, Innovation Complex no later than May 30, 2018

The successful applicant(s) will be notified by email.

Payment of this award is conditional upon registration in Year 3 of an Environment Program at UofT Mississauga in the 2018-2019 Fall/Winter Session.
References:

List two individuals who can attest to your campus or community activities. Letters of recommendation are **not** required but may be attached if you choose.

1. ________________________________  ________________________________  
   Name                      Position
   ________________________________  ________________________________
   Organization                  Phone Number

2. ________________________________  ________________________________  
   Name                      Position
   ________________________________  ________________________________
   Organization                  Phone Number

Declaration:

I hereby certify that I have read the information regarding the protection of my privacy and that the information provided in and with this application is, to the best of my knowledge, true and complete. I also authorize the release of the information contained herein to the appropriate Scholarship Selection Committee.

_____________________________________________ ___________________________
Signature        Date

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