

2024/2025 Partners36 Scholarships

Surrey Schools is pleased to offer a number of scholarship and bursary opportunities to its graduates, called Partners36 Scholarships. These scholarships are made possible through the contributions of individuals, corporations and community service organizations.

Students attending a district secondary school, a learning centre, SAIL or other District programs are eligible. See the general eligibility requirements below.

Due Date

Completed applications should be **submitted to the Scholarship Coordinator at your school** by the **due date designated by your school**. This is usually anytime between **February 15th and April 15th.**For more information and your school's due date, contact your school scholarship coordinator.

General Eligibility Requirements

- 1. Applicants must be a Canadian citizen or have Permanent Resident status.
- 2. The candidate must be a graduate of the Surrey School District.
- 3. In order to receive the funds the candidate must be registered for a full course load at a post-secondary institution. This would be whatever is considered a full course load at the institution concerned, however, the committee may give special consideration to candidates whose circumstances are extraordinary.
- 4. Bursaries and scholarships will be announced at various times, and funds will be awarded when students provide proof of attendance at a recognized post-secondary institution. For our purposes, "post-secondary institution" shall be defined as follows:
 - a. A recognized university
 - b. Colleges offering transfer courses
 - c. Institutions which prepare students for specific trades and vocations and which are recognized and supported by the government (eg. BCIT)
- 5. Applications for financial help to attend other institutions will be considered and awards may be granted at the discretion of the committee. A valid student card or a receipt for tuition fees is required as proof of registration.
- 6. The candidate's academic achievement will be based on a review of an official transcript of the candidate's academic record for grades 11 and 12.
- 7. Scholarships are classed as earnings and reportable to CRA. Recipients of a scholarship will be required to provide their social insurance number, if they have not already done so, prior to receiving their award.
- 8. Please note winners names and photos may be published in local newspapers.
- 9. The funds provided through these scholarships must be used for tuition, fees and books. Other post-secondary expenses are not covered through these bursaries.



HAL SINCLAIR MEMORIAL SCHOLARSHIP 2024/2025

AVAILABLE SCHOLARSHIP: 2 X \$750.00

PERSONAL PROFILE:	
1. Given Name(s):	
2. Family Name:	
3. Email:	
4. School Courier Number (see below or ask your scholarship coordinator for this)	
5. Date of secondary school graduation: Month:	Year:
Type of training/study planned for next year: a) What institution do you plan to attend?	
b) In what course/faculty do you intend to register?	

c) What career are you planning to pursue?

SCHOOL COURIER NUMBERS:

SCHOOL	COURIER NO.	SCHOOL	COURIER NO.
Clayton Heights Sec	175	Earl Marriott Sec	105
Elgin Park Sec	156	Enver Creek Sec	114
Fleetwood Park Sec	167	Frank Hurt Sec	106
Fraser Heights Sec	141	Grandview Heights	177
Guildford Park Sec	047	Johnston Heights Sec	045
Kwantlen Park Sec	048	LA Matheson Sec	079
Lord Tweedsmuir Sec	041	North Surrey Sec	028
Panorama Ridge Sec	032	Princess Margaret Sec	046
Queen Elizabeth Sec	022	Salish Secondary	215
Semiahmoo Sec	049	Sullivan Heights Sec	164
Tamanawis Sec	150	City Central L.C.	574
Cloverdale L. C.	593	Guildford L. C.	594
North Surrey L. C.	591	S Surrey/White Rock L.C.	592
SAIL	270	ED SERVICES	525



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CRITERIA:

Applicants must intend to study full-time at an accredited university and planning to pursue a CAREER IN EDUCATION

Applicants must demonstrate high academic achievement as well as evidence of the following:

Demonstrate financial need

- School & Community Volunteer Service
- Participation in school & community activities
- Leadership

Applicants are required to complete all sections of this application by **typing** the required information in the spaces provided. Handwritten and altered/modified applications will not be accepted.

Ple	ase a	ttach	tach the following documentation:	
		A Di	A Diploma Verification that includes Grade 12 semester two interim mark	s.
			 See your Counselor or your Scholarship Coordinator for this document. If your semester two interim marks are not recorded on your Diploma Verific your marks and include it with your application. 	ation, see your teacher(s) and ask for a printout o
		Two	Two reference letters as follows:	
		0	One letter must be from a principal, counsellor or teacher in your sch	ool
		0	 One letter must be from an adult who supervised you during your vol community organization. This cannot be a school and/or school district 	·
			 Both letters must: show evidence of having worked with youth or children (ex. Peer tuto experiences. 	oring or coaching), citizenship and/or leadership
			be one page maximum	
			 have a physical or digital signature (typed/scripted signatures are not be on official letterhead of the organization or school (if letterhead is writer's contact information and relationship to you) 	• •
			IAL PROFILE:	
I.	GIV	en N	en Name(s):	
2.	Sch	ool (ool Courier Number:	
3.	Dat	te of	e of secondary school graduation: Month:	Year:
4.	Тур	e of	e of training/study planned for next year:	
	a) W	/hat	hat institution do you plan to attend?	
			what course/faculty do you intend to register?	
			hat career are you planning to pursue?	
	σ,			
5.	Ansv	wer y	ver yes or no to the following:	
	a) H	ave y	ive you been chosen and nominated by your school for the CMOLIK	foundation Scholarship?
			Yes No	
	b) H	ave v	ave you applied and been interviewed for the Beedie Luminaries Sch	nolarship?
	•		, Yes No	·



Partners36 Scholarships & Bursaries

HAL SINCLAIR MEMORIAL SCHOLARSHIP 2024/2025

AVAILABLE SCHOLARSHIP: 2 X \$750.00

Given Name(s):		School Courier #:				
SCHOOL VOLU	NTEER SERVICE:					
	 Add up your hours and put the total at the bottom of the chart Include the contact's name and email address or phone # If you have more entries than the chart provides attach another page in the exact same formatting as the chart below 					
Activity	Briefly Describe Involvement (20 words max per item)	L	Dates(s)	# of Hours	Contact's name and email address or phone number	
	(20 No. do man per nom)					

Total # of Hours



Partners36 Scholarships & Bursaries

HAL SINCLAIR MEMORIAL SCHOLARSHIP 2024/2025

AVAILABLE SCHOLARSHIP: 2 X \$750.00

Given Name(s):			School Courier #:			
ist your community volunteer service (time and energy donated for the benefit of others), which was unpaid and not require or courses. Only list activities done in the last three years. • Briefly describe your involvement • Indicate with an "L" if you were in a leadership role • Provide the date(s) for the activity • Total number of hours you completed in that activity • Total number of hours you completed in that activity • Total number of hours you completed in that activity				e total at the bottom of the chart mail address or phone # the chart provides attach another		
Activity Briefly Describe Involvement (20 words max per item)		L Dates(s)		# of Hours	Contact's name and email address or phone number	

Total # of Hours



Partners36 Scholarships & Bursaries

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Given Name(s):	School Courier #:

EXTRA-CURRICULAR ACTIVITIES:

List membership and participation in organizations you are or were a part of. For example, going to club/youth group meetings, playing on a team, performing at a competition, etc. Only list activities done in the last three years.

- Briefly describe your involvement and role in this team, group or organization
- Indicate with an "L" if you were in a leadership role.
- Provide the date(s) for the activity
- Include the contact's name, email address or phone #

Organization/Activity	Briefly Describe Involvement (20 words max per item)	L	Dates(s)	Contact's name and email address or phone number



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taken and are going to take to reach this goal.	considering a Career in Education and the steps you have



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Given Name(s):	School Courier #:
FINANCIAL NEED CONFIRMATIO	
See your counselor and an admi	trator for confirmation of financial need.
FOR SCHOOL USE ONLY:	
Instructions for Counselors and	Iministrators
mistractions for counscions und	Timistrators
	and its meaning, please consider whether, in your opinion, this student would r selected post-secondary program due to lack of funds.
CONFIRMATION:	
•	applicant has demonstrated a need for financial assistance for post-secondary andidate to be considered for this award.
Counsellor Signature:	
Please print Name:	
Date:	
Administrator Signature:	
Please print name:	
Date:	