

Florence E. Taylor Charitable Foundation Scholarship Application

The Florence E. Taylor Charitable Foundation Scholarship is made available to women through the generous contribution of Florence E. Taylor, a member of Chapter C, Alberta, P.E.O. Sisterhood.

Awards are made at the discretion of the Board of Directors of the Foundation. The minimum award amount is currently \$1000 in Canadian funds, and the number of scholarships awarded annually may vary. Awards will be announced in late August.

Criteria

To be eligible to receive a scholarship, you must meet the following conditions:

- Have a Social Insurance Number.
- Be a Canadian citizen or permanent resident
- Be a resident in Alberta or Saskatchewan for at least two years.
- Be entering first or second year of full time study in **your first** degree or diploma program.
- Be studying or planning to study at any accredited Alberta or Saskatchewan post-secondary institution.
- Demonstrate financial need, based on your submitted projected budget.
- Be committed to your educational goal, as shown by your academic record, personal statement, and letter of reference.
- **Must be sponsored by a P.E.O. Chapter.**

This scholarship can only be received once!

INSTRUCTIONS TO APPLICANT:

1. Complete this application form.
2. Provide a signed “**Personal Statement**” of your educational goals and objectives. Briefly describe your career or vocational goal after graduation. Indicate any specific field of interest or the type of employment you plan to obtain. (Maximum of one page.)
3. Obtain one **letter of reference** from a responsible person who has known you for at least two years. The letter should indicate the name, address and phone number of the person providing the reference. The reference letter should be in a sealed envelope.
4. Arrange for **final high school OFFICIAL transcripts** from the Department of Education and provide a copy to your sponsoring PEO Chapter by the date indicated in Instruction 5. **NOTE: Detailed Academic Reports will NOT be accepted.**

5. **Submit the following to your sponsoring P.E.O Chapter by the date shown below:**

- Completed Application Form - signed
- Original or copy of final official high school transcript and (if applicable) first year post-secondary transcript.
- Applicant’s Personal Statement - signed
- Letter of reference (in sealed envelope)

**Return Application to the PEO Chapter member (name) _____
phone number _____
by: (date) _____**

The PEO Chapter must submit the application package **to be received before August 31st** to: Trust Officer, Florence E Taylor Charitable Foundation
c/o Scotia Trust
Suite 2100, Stantec Tower
10220 103 Avenue NW
Edmonton, Alberta T5J 0K4

NOTE: Late or incomplete packages will not be considered.

Personal Information

Last name _____
First name _____
Middle name _____

Date of Birth _____
year/month/day

Citizenship Canadian
Permanent Resident

Mailing address

Address _____

City/Town _____
Postal code _____
Phone _____

Social Ins. No.

Marital Status Single
Divorced
Married
Widowed
Common-law

Dependent children No Yes

Permanent address

Address _____

City/Town _____
Postal code _____
Phone _____

If yes, please specify:

Name Age Reside with you?

Email address: _____

Academic and Career Information

Name and address of post-secondary
Institution you are attending or plan to
attend:

Intended degree or diploma:

Entering: First year Second year

Number of months you will be registering as
a full-time student: _____ (# of months)

Intended field of study:

Where will you live while attending school?
Parents' home _____ other _____

Letter of Reference - Reference's Information:

Name _____
Address _____

Phone _____

Financial Information/Budget

Complete this budget for your upcoming academic year. Please be as accurate as possible. If you are married or a single parent, your budget should be for the entire family. Explain any extenuating circumstances in the *Comments* section below.

Resources

Savings at start of academic year (excluding investments) \$ _____

Investments (specify):
 _____ \$ _____
 _____ \$ _____

Your estimated earned income during the academic year \$ _____

Scholarships and bursaries for upcoming year (specify):
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Contributions from others (i.e. parents or spouse, etc.) \$ _____

Other income (specify):
 _____ \$ _____
 _____ \$ _____

Total Resources: \$ _____

Expenses For School Year

Tuition and fees \$ _____

Books and supplies \$ _____

Estimated living costs for **academic year**:

Rent \$ _____

Food \$ _____

Utilities \$ _____

Transportation \$ _____

Clothing \$ _____

Personal \$ _____

Child Care \$ _____

Additional expenses (specify):
 _____ \$ _____
 _____ \$ _____

Total Expenses: \$ _____

If your total expenses are greater than your total resources, how do you plan to meet this shortfall?

Comments:

Explain any extenuating circumstances of which we should be aware or make any additional comments. If you need more space, please attach a separate sheet.

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