

APPLICATION FORM

MATTINSON SCHOLARSHIP PROGRAM FOR STUDENTS
WITH DISABILITIES
2017-2018

Nominee Name (please print): _____

6. VOLUNTEER/COMMUNITY INVOLVEMENT AND/OR EXTRACURRICULAR ACTIVITIES

The following list is to be used to record each of the activities you wish to be considered for the scholarship program.
Additional copies of this section can be attached if more activities are to be considered.

Activity Details

Organization	_____				
Dates	_____		Total Hours for Period _____		
	From(dd-mm-yyyy)	To (dd-mm-yyyy)			
Role	<input type="checkbox"/> Leader	Payment Received	<input type="checkbox"/> Yes	Part of Mandatory Service Requirement	<input type="checkbox"/> Yes
	<input type="checkbox"/> Organizer Leader		<input type="checkbox"/> No		<input type="checkbox"/> No
	<input type="checkbox"/> Participant				

DETAILS OF ROLE, ACTIVITIES AND ACCOMPLISHMENTS

Activity Details

Organization	_____				
Dates	_____		Total Hours for Period _____		
	From(dd-mm-yyyy)	To (dd-mm-yyyy)			
Role	<input type="checkbox"/> Leader	Payment Received	<input type="checkbox"/> Yes	Part of Mandatory Service Requirement	<input type="checkbox"/> Yes
	<input type="checkbox"/> Organizer Leader		<input type="checkbox"/> No		<input type="checkbox"/> No
	<input type="checkbox"/> Participant				

DETAILS OF ROLE, ACTIVITIES AND ACCOMPLISHMENTS

Activity Details

Organization	_____				
Dates	_____		Total Hours for Period _____		
	From(dd-mm-yyyy)	To (dd-mm-yyyy)			
Role	<input type="checkbox"/> Leader	Payment Received	<input type="checkbox"/> Yes	Part of Mandatory Service Requirement	<input type="checkbox"/> Yes
	<input type="checkbox"/> Organizer Leader		<input type="checkbox"/> No		<input type="checkbox"/> No
	<input type="checkbox"/> Participant				

DETAILS OF ROLE, ACTIVITIES AND ACCOMPLISHMENTS



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7. NOMINEE CONSENT

Universities Canada administers the **Mattinson Scholarship Program for Students with Disabilities** of their scholarship program. This administration role includes the application process, the evaluation and selection process, the processing of recipients' files and the administering of payments for the **Mattinson Scholarship Program for Students with Disabilities**. The purpose of this statement is to set out Universities Canada's commitment to the protection of personal information collected, used, disclosed or retained in performing this function. Universities Canada will comply with the requirements of the Canadian Personal Information Protection and Electronic Documents Act (PIPEDA) for the collection, use, disclosure and retention of personal information provided by you in the course of your scholarship application.

Universities Canada has appointed a Privacy Officer with overall responsibility for Universities Canada privacy compliance. Should you have any questions, concerns or complaints regarding the privacy of your personal information please contact the Privacy Officer by calling (613) 563-1236 or by writing to: Privacy Officer at 1710-350 Albert Street, Ottawa, ON K1R 1B1.

Please find below a summary of Universities Canada's privacy policies concerning the collection, use, disclosure and retention of the personal information you will be submitting in this application. Please read the information below carefully **as by submitting your application you are consenting to the collection, use, disclosure and retention of your personal information as summarized below**. A full version of Universities Canada's Privacy Code which outlines Universities Canada's complete personal information management practices, policies and procedures is available on line at www.univcan.ca or by requesting a copy from Universities Canada's Privacy Officer.

PURPOSE OF COLLECTION, USE, DISCLOSURE AND RETENTION OF PERSONAL INFORMATION

Your personal information is being collected by Universities Canada for the purposes of processing and evaluating scholarship applications, selecting and processing scholarship recipients and administering scholarship payments once awarded. Your personal information will be collected from you and may also be collected from references, secondary and postsecondary educational institutions, government, community or other sources based on the information provided by you in this application. This process will include the release of any or all of your personal information to Universities Canada and Selection Committee members as well as any other third parties where such release is necessary for verification, scholarship evaluation, selection, administration purposes as well as internal Universities Canada system administration purposes. Your personal information may be used in the future for the purposes of contacting you and by Universities Canada in evaluating outcomes associated with the scholarship program. There will be no other uses or disclosures of your personal information by Universities Canada unless required or authorized by law or unless you are contacted and your permission is requested. The personal information being collected in the application is limited to only that information which is necessary for the full consideration of your scholarship application and the purposes noted herein.

PROMOTION PURPOSES FOR RECIPIENTS

Universities Canada may from time to time wish to announce scholarship winners, their current educational institution, the university or college where they intend to study and the course of study funded by the scholarship, as well as the amount of the scholarship, or to use or disclose recipient information for promotional purposes. Universities Canada shall be responsible for obtaining the consent of recipients for such purposes.

ACCESS TO AND ACCURACY OF YOUR PERSONAL INFORMATION

Upon request to Universities Canada's Privacy Officer, you will be given access to your personal information held by Universities Canada. Universities Canada will, on request, correct inaccuracies in your information. Please be advised that inaccuracies must be brought to the attention of Universities Canada prior to the selection of a scholarship recipient[s] in order for us to record and bring the correction to the attention of the Selection Committee.

RETENTION OF PERSONAL INFORMATION

Universities Canada will securely retain personal information about applicants for the purposes of verifying applications, completing the assessment and evaluation, selecting a recipient, administering scholarship payments, and addressing any concerns regarding scholarship awards. Furthermore, Universities Canada will retain certain personal information collected throughout the application process for the purposes of contacting you in the future, for assessing the efficacy of the scholarship and for undertaking aggregate analysis with regards to Universities Canada programs. This personal information may be kept indefinitely. Universities Canada will retain a permanent listing of the names and internal identification numbers of the recipients of the scholarship program in any given year. Universities Canada complies with its Privacy Policy as outlined herein or follows a policy with comparable privacy standards.

CONSENT

You may refuse to provide personal information to us. You may also withdraw your consent at any time, subject to legal or contractual restrictions and reasonable notice. However, in either case, this may limit your scholarship eligibility and our ability to administer the scholarship payments. **By completing and signing [submitting] this application you are consenting to the collection, use, disclosure and retention of your personal information for the above stated purposes.**

Date:

Signature of Nominee:



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8. AUTHORIZATION FOR THE DISTRIBUTION OF PERSONAL INFORMATION

In compliance with Privacy Law, personal information about your nomination will not be released except where such release has been specifically authorized by you herein. Third parties (parents, guardians, etc.) may contact Universities Canada on your behalf, in person, by phone, or by email, to receive information about your nomination only if you have authorized this in advance.

In the spaces below, provide the names of up to two parties to whom Universities Canada may release your personal information. Please also provide a password for their use when contacting Universities Canada. Information about your file will be given only to those individuals who have been named below and who can provide this password. It is your responsibility to ensure the parties named below are aware of the password you have provided Universities Canada.

Note: this password will not work with your online account. Your Account Number and online account password to verify the status of your nomination will be mailed to you at a later date.

Parties who may have access to your information:

Name _____ Name _____
Last First Last First

Password _____

Date:

Signature of Nominee:

9. DECLARATION

I certify that all information provided in this nomination form and attached documents are true and accurate to the best of my knowledge. I understand that acceptance of this nomination or receipt of any scholarship/award issued to me may be revoked without notice if any information in this nomination is subsequently found to be false.

Name Printed:

Date:

Signature of Nominee:

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10. CANDIDATE'S CHECKLIST

Please provide the following supporting documentation with the nomination form:

- An **official** transcript of the last three semesters of available marks, that is, marks for the period of September **2015** to December **2016**. If you were not enrolled in school during this time, please provide marks for the last three available terms.

NB: A transcript is considered *acceptable* only if it meets the following criteria:

- 1- It is presented on the official paper of the institution.
- 2- It bears the appropriate signature and/or seal of the institution.
- 3- Photocopies or electronic transcripts will not be accepted.

Home school grades will only be accepted if they have been validated through a recognized independent evaluation process.

- Two signed letters of reference with the references' original signatures. The reference letters must come from two separate individuals, and include the references' contact information, as per the program guidelines.
- A 250-word essay describing your volunteer/community involvement and/or extracurricular activities over the past five years.
- The Universities Canada form listing your volunteer/community involvement and/or extracurricular activities.
- The nomination form completed and signed by a representative of the nominee's university disabilities' center.
- An email address for the nominee on the first page of this nomination.

PLEASE NOTE: If any of the above requirements are not met, your nomination will be considered incomplete and your nomination will not be considered.

IMPORTANT: Postmarked application form and nomination must be sent to Universities Canada on or before **MAY 15, 2017**. You are responsible for ensuring that the post office postmarks your envelope by the due date. It is recommended that you send your nomination by registered mail or courier, to ensure the package can be tracked. Your nomination will be acknowledged by email once it has been received and processed by Universities Canada.

Please mail your documents to:	Contact Us:
Higher Education Scholarships Universities Canada Ref: Mattinson Scholarship Program for Students with Disabilities 1710-350 Albert Street Ottawa ON K1R 1B1	Tel.: (613) 563-1236 Toll free: 1-844-567-1237 Fax: (613) 563-9745 E-mail: awards@univcan.ca

11. IMPORTANT DATES

May 15, 2017	Deadline date to send your application form and nomination form to Universities Canada.
May 2017	You will receive an acknowledgement of your nomination.
May 29, 2017	Deadline for receipt of supporting documentation by Universities Canada. Be sure to check your Online Account to ensure all documentation has been received and accepted.
Mid-July 2017	Meeting of the Selection Committee.
August 2017	All candidates will receive notice in writing of the results of their nomination. Results will not be communicated by telephone or email.
September 15, 2017	Deadline date for winners to accept their scholarship.



NOMINATION FORM

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I wish to nominate _____
(Name of nominee – please print)

from _____
(Name of university – please print)

a student enrolled in their second or third standing year of studies during the 2017-2018 academic year (please select one):

Second Year

Third Year

In your professional opinion, which category of disability does your candidate fall under (please pick only one):

Physical Disability

Sensory Disability

Mental Health Disability

Learning Disability

*Please see Appendix A of the guidelines for definitions of each disability listed above.

Declaration of Eligibility

The nomination must be done by a representative of the nominee's university disabilities' center.

I certify that the candidate meets the eligibility requirements **as outlined in the award program guidelines.** Yes No

Is the candidate currently receiving any financial aid? Yes No

Nominating Official – PLEASE PRINT

Name _____ Mr. Ms.
Last First

Title _____

Address _____
Street City Province Postal Code

Telephone _____ Email _____

Date _____

Signature _____

Please provide the following information of a person at the university who will act as a **second contact** for correspondence concerning this nomination – PLEASE PRINT

Name _____ Mr. Ms.
Last First Middle Initial

Title _____

Permanent Address _____
Street City Province Postal Code

Telephone _____ Email _____

Date _____

Signature _____



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Please note that each eligible institution may only nominate **ONE CANDIDATE** and that the nomination must be duly endorsed by the director of the institution's disabilities centre or the institution's awards office. – PLEASE PRINT

Name _____ Mr. Ms.
Last First Middle

Address _____
Street City Province Postal Code

Telephone _____ **Email** _____

_____ Date _____ Signature - Director of Awards/Financial Aid Office

LETTER OF REFERENCE - GUIDELINES

MATTINSON SCHOLARSHIP PROGRAM FOR
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IMPORTANT: **A COPY OF THESE GUIDELINES IS TO BE GIVEN TO THE PERSON WHO WILL WRITE YOUR LETTER OF REFERENCE.**

You have been asked to write a letter of reference on behalf of a student applying for the Mattinson Scholarship Program for Students with Disabilities. The nominee has been asked to submit two letters of reference written by individuals in support of their academic achievement and volunteer/community service and/or extracurricular activities (i.e. professor, volunteer supervisor). The reference cannot be related to the nominee. To assist you in the preparation of this letter, please refer to the instructions and information below.

These scholarships are awarded to students with disabilities for postsecondary studies, in any chosen field, at recognized educational institutions. The scholarships are awarded on the basis of academic achievement and volunteer/community service and/or extracurricular activities.

Academic reference letters

If you are providing an academic reference, please state the length of time and the capacity in which you know the nominee. Your letter of reference should also concentrate on the potential the nominee has to excel in postsecondary studies.

Volunteer/community service and/or extracurricular activities reference letters

If you are providing a volunteer/community service and/or extracurricular activities reference letter, please state the length of time and the capacity in which you know the nominee. Describe their role, their activities and their accomplishments and how their service has impacted the organization or community. In addition, please indicate if the nominee demonstrated exceptional leadership, extraordinary effort and ability to overcome adversity.

The letter should be given directly to the nominee so that it may be included with their nomination.

Please ensure that the letter is typewritten on letterhead, is signed and includes your contact information. The student would appreciate a prompt response as the deadline for nomination is **May 15, 2017**.

Thank you very much for taking the time to support a Mattinson Scholarship Program for Students with Disabilities candidate and contributing to a fair selection process.