

## **Zandbergs Scholarship Application**

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**The Zandbergs Scholarship** is intended to help those individuals intending to pursue a career in teaching and particularly those who intend to teach in languages other than English.

### **Scholarship Guidelines**

Please review these guidelines prior to completing the application form.

#### **Eligibility:**

Applicants should

1. Be a resident of Lambton County at the time of application OR have been a resident in the past three years and be attending school to complete their teaching degree.
2. Be a Canadian citizen or a landed immigrant intending to teach in Canada
3. Have been accepted into a programme that will result in being able to obtain a teaching certificate OR be currently enrolled in a Faculty of Education

#### **Application Process:**

All applicants are required to complete in full the scholarship application form and include all required documents as listed. The completed application and supporting documents must be sent or delivered to:

**Sarnia Community Foundation, 110-560 Exmouth Street, Sarnia ON N7T 5P5**

**DEADLINE: May 15<sup>th</sup> of any year.**

1. A letter or email acknowledging the receipt of the completed application will be sent.
2. All applications that include the requested material and that meet the guidelines as outlined above are forwarded for consideration to the SCF Grants & Scholarship Committee for their review. Please note: A meeting with the Committee may be required.
3. Successful applicants will be informed in writing with payment to follow to the recipient's educational institution. The recipients should be available for photos, interviews or any other promotional activities as arranged by the Sarnia Community Foundation (SCF).
4. The decision of the SCF Grants & Scholarship Committee and the SCF Board is final. Those applicants that are declined are informed in writing.

For more information contact the Grants Administrator

Phone: 519 332 2588 E-mail: [office@sarniacommunityfoundation.ca](mailto:office@sarniacommunityfoundation.ca)

*The Sarnia Community Foundation has a privacy policy that protects personal information. Any personal information requested on this application will only be used to assist with the assessment of the application. A copy of the application form and supporting documents may be kept for audit purposes.*

**PERSONAL INFORMATION**

Name

Address

Postal Code

Telephone

Email

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**Signature of applicant**

**PLEASE NOTE: By signing the application the applicant gives SCF permission to publish their name should they be the recipient. All other information will remain confidential.**

**INFORMATION TO BE INCLUDED** Evidence of residency in Lambton County or attendance at school TWO letters of recommendation

These must be written on your behalf by someone other than a family member or relative. One should be from an individual qualified to speak on your academic performance. The second should be from someone who has knowledge of your community involvement.

 Information about your academic standing

This must include a copy of your most recent transcript.

 An essay of up to 1000 words addressing both of the following questions

What inspired you to become a teacher?

What are your goals and aspirations as a teacher?

**Please Note:**

*Should you be selected as the scholarship recipient you will be required to provide the Foundation with your full legal name, date of birth and your Social Insurance Number. This information is required for audit purposes at the Foundation and will only be used as required by the distribution of scholarship funds.*

**FOR OFFICE USE ONLY**

FILE # \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_ APPLICATION COMPLETE \_\_\_\_\_

ACKNOWLEDGEMENT SENT (date) \_\_\_\_\_ APPROVED \_\_\_\_\_ DECLINED \_\_\_\_\_

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**Additional Application Information**

1. What programme of studies are you planning to take or what are you already enrolled in.

2. Describe what led you to choose this field of study

3. What subjects do you intend to teach?

**Declaration:**

**I certify that the information in this application is true and accurate.**

**I acknowledge and accept that should my application be successful that the funds will be used for the purposes outlined in this application and for no other purpose, unless permission is sought and obtained in writing in advance from the Sarnia Community Foundation.**

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**Signature of applicant named on page2**

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**Date**