

COOPERATION Scholarship Study Scholarship of \$1,000.

This scholarship is offered by Caisse populaire de la Vallée to a student who is going on to further his or her post-secondary education and who has demonstrated the following attributes: cooperation, leadership, social engagement and community involvement.

PURPOSE

The purpose of the scholarship is to recognize qualities of cooperation, leadership, social engagement and community involvement in a person going on to post-secondary education.

DEADLINE

The Board of Directors of Caisse populaire de la Vallée will select the winner from the applications received by Thursday, February 28, 2019 at the latest. The winner will be announced at the General Annual Meeting of the Caisse that will take place on April 23rd, 2019.

AMOUNT

The \$1,000 scholarship will be presented to the winner on reception of proof of enrolment at a post-secondary educational institution.

ADMISSIBILITY

To be admissible, the candidate must:

- live in the geographical area covered by Caisse populaire de la Vallée
- be a member of Caisse populaire de la Vallée
- be committed to undertake the first year of a full-time program of post-secondary education leading to a degree or a certificate.
- be 30 years of age **or less** on April 23, 2019

SELECTION CRITERIA

- The applicant must have manifested leadership abilities.
- The applicant must have demonstrated cooperation, social engagement and community involvement.

TO APPLY

- Fill in the questionnaire.
Include a letter of recommendation of a person who knows you well.

COOPERATION Scholarship

Study Scholarship Application form

First name

Middle name

Family name

Date of birth: ____/____/____

Sex: ☐ Male ☐ Female

Member of the Caisse? _____

Address: _____

Street / Route / Concession / P. O. Box

Town

Province

Postal code

Phone number: (____) _____

E-mail: _____

Name of parent or guardian: _____

Address (if different from above): _____

Street / Route / Concession / P. O. Box

Town

Province

Postal Code

Phone number: (____) _____

High school(s) attended: _____

COOPERATION Scholarship

Post-secondary schools and programs applied for:

1. _____
2. _____
3. _____

In this section, please indicate the activities that demonstrate your leadership abilities, your cooperation skills, your social engagement and your community involvement. You may continue on the other side of the page.

I attest that the information contained in this application form and the documentation provided is true, exact and complete.

Signature: _____

Date: _____

Please return application and letter of recommendation to Caisse populaire de la Vallée, 255 Main Street South, Alexandria ON, KOC 1A0 or by email at kim.t.julien@desjardins.com to the attention of Kim Julien.