

2024 Application Form

WILLIAM HSU MEMORIAL AWARD

Eligibility:

- Outstanding participation in activities that support the St. Joseph's College Community. The recipient does not need to be Catholic.
- Be a current full-time student at the University of Alberta in good academic standing (GPA of 2.5 or greater on a 4.0 scale) during the 2023 calendar year.
- Applicants are asked to provide a list of the activities they participated in during the 2023-24 academic year that contributed to the enhancement of the St. Joseph's College community, as well as a reference letter.

	Personal Information (P	Please Print)
Name:		
Current Address:		
City/Prov:	Postal Code:	Phone:
Student ID number:		
Note: Successful applicants will be	asked to provide their Social In	asurance Number.
	Academic Inform	ation
Recipients must have maintained go calendar year.	ood academic standing (GPA of	f 2.5 or greater on a 4.0 scale) during the 2023
☐ I have included an unofficial Unive	rsity of Alberta transcript.	
S	tatement of Involvement at St	t. Joseph's College
Please attach a summary outlining your involvement at St. Joseph's College during the 2023-24 academic year. In this summary, include the activities you were involved in, the tasks associated with this activity, the time dedicated to each activity and how your participation contributed to the SJC community.		
\square I have included a summary of invol	vement at St. Joseph's College	e.
	Letter of Refere	ence
Please attach one letter of reference award criterion.	e from an individual that can sp	peak to your connection to the
\square I have included one letter of refere	nce.	
Award Amount: \$1,000		

Application Declaration: Under the Freedom of Information and Protection of Privacy Act we are required to advise you that the information you have provided in this application is necessary to determine your eligibility for this award. If you have any questions about the collection of this information, please contact the Vice-President (Academic) & Dean, St. Joseph's College, University of Alberta, Edmonton, Alberta, T6G 2J5, phone (780) 492-7682.		
I hereby certify that the information contained in this application is complete, true, and correct in all respects. I authorize St. Joseph's College to access my academic records and confirm other information contained in this application as necessary.		
I understand that I may have to repay my award if there are changes to my academic status or if any information I have provided is false.		
I understand that I will be required to provide a photo for promotional purposes, a thank you note for the award donor, and attend the annual Commencement Breakfast in April, if selected for this award.		
I consent to the public release of my name, personal information and study plans to the donor(s) if I am a recipient of an award.		
I confirm that I have read and understood the eligibility criteria for this award, and agree to the terms therein.		
Signature Date		
Please submit your application to the Office of the Vice-President (Academic) & Dean by email at <u>sjcdean@ualberta.ca</u>		
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