



St. Peter's College

Affiliated with the University of Saskatchewan



Accelerated Scholarship Application

APPLICANT DEMOGRAPHIC

2021– 2022

Deadline: June 1, 2021

Last Name

First Name

Middle Initial

Social Insurance Number (SIN)

Date of Birth

Gender

Male

Female

Mailing Address (most current)

Day/Month/Year

Town/City

Postal Code

Home Telephone

Cell Phone

Current Grade

Email

Name of School

Residence Status (check one only)

- Canadian Citizen
 Permanent Resident
 International Student

We cannot process your application without a valid Social Insurance Number.

If your mailing address or email address changes, notify SPC immediately.

APPLICANT GENERAL INFORMATION

I understand that the Accelerated Scholarship requires me to apply to the University of Saskatchewan and I am prepared to pay the one-time \$90 application fee.

- Yes No

All St. Peter's College Accelerated Scholarship classes are face to face classes on the campus in Muenster. I am prepared to regularly attend classes and can undertake transport to do so.

- Yes No

Participation in the Accelerated Scholarship Program requires consent of your school. I have included a statement of consent signed by the school principal.

- Yes No

Participation in the Accelerated Scholarship Program requires consent of a parent / guardian. I have included a statement of consent signed by my parent / guardian.

- Yes No

If you continue studies at the U of S or St. Peter's College, you will not be required to repay the application fee.

APPLICANT EDUCATIONAL GOALS & EDUCATION HISTORY

Please advise which area of study or course you would like to study at St. Peter's College.

Consult your career counsellor or contact SPC if you are unsure of your course options

(306) 682-7886 or
admissions@stpeters.sk.ca

APPLICANT DECLARATION

I hereby declare that I have answered all questions applicable to me and that the answers given by me are complete and true in all respects. If my application for scholarships, awards and bursaries is approved, I will use the proceeds of any monies granted for payment only for education or living costs directly related to my program. I understand that values of scholarships, awards, bursaries, and policies and procedures about the administration of the awards, for which I have applied, may change at the discretion of the College. I further understand that my personal information is collected on this application for the purposes of administration of the awards and will be shared with members of the selection committee. If I am selected as the recipient of an award, my name and program of study will be disclosed to the donor of the award, who may wish to publish this information publicly (e.g. on awards websites). St. Peter's College may also publish this information in marketing materials and for the purposes of awards ceremonies. By applying for awards, I consent to the use and disclosure of my personal information as described above.

Signature

Date

SCHOLARSHIP, AWARD AND BURSARY INFORMATION

St. Peter's College recognizes and respects the importance of privacy. The information on this form is collected under the Local Authority Freedom of Information and Privacy Act. The information on this form is used only for administrative and statistical purpose by St. Peter's College or persons authorized by St. Peter's College who require it to perform their duties under the Act and for the purposes of administering scholarship, award and bursary operations. If you have any questions about the collection or use of this information, please contact St. Peter's College Administrative Offices at (306)682-7888 or visit our website at www.stpeterscollege.ca.

Please ensure that the necessary permissions are attached to this application form.

Forward applications by email or mail to:

St. Peter's College

Attention: Accelerated Scholarships

RPO Box 40

Muenster, SK S0K 2Y0

Fax: (306) 682-4402 Phone: (306) 682-7886 E-mail: admissions@stpeters.sk.ca

Statement of Consent – Parental/Guardian Consent

I, _____, the parent/guardian give consent to my grade 12 youth,
(print name of parent/guardian)

_____, to attend a university class at St. Peter's College during their grade 12
(print name of student)

School year. I understand that the student and I will be responsible for all additional fees, and costs associated with attending this university class. I agree that the student is responsible to be in attendance for the university classes and exams unless notice is given to student services or the professor.

By signing below, I acknowledge and agree to all the above and to allow my youth to attend the university class:

Signature of parent/guardian

Date

Statement of Consent – Principal Consent

I, _____, the principal give consent to the grade 12 student,
(print name of principal)

_____, to attend a university class at St. Peter's College during their grade 12
(print name of student)

School year. I understand that the student may have to miss grade 12 class time due to travel or attendance for this university class. I agree that the student is responsible to be in attendance for the university classes and exams unless notice is given to student services or the professor. I agree that I have spoke in depth with the student about committing to the responsibility associated with attending the university class and ensuring to keep grades and school work for the grade 12 classes as high priority.

By signing below, I acknowledge and agree to all the above and to allow the student to attend the university class:

Signature of principal

Date