



The Queen of Angels Academy Foundation

2012 Jennifer Robertson Memorial Scholarship

Application Form

100 Bouchard Blvd.
Dorval, Quebec.
H9S 1A7

Tel.: 514-636-0900 ext. 255 ♦ Fax: 514-636-1158
E-Mail: foundation@qaa.qc.ca Web: www.qaafoundation.org

Dear Applicant,

Thank you for your interest in the **Jennifer Robertson Memorial Scholarship**. The recipient will be a graduating student of the Academy who will be continuing her education.

Jennifer was a student at Queen of Angels Academy from 1994 until her untimely death in 1998. Jennifer was a gifted student, artist and reader, excellent athlete, good friend and loved by her peers.

In recognition of the tenth anniversary of Jennifer's passing, her family announced an annual scholarship that will be offered in her name. Each year, the Foundation/Academy will invite applications and be asked to choose one student. The scholarship (valued at \$500) is administered through the Queen of Angels Academy Foundation.

Application Requirements:

- You must be graduating from Queen of Angels Academy and be accepted into a post-secondary educational institution effective the fall 2012;
- You must show a great interest and enthusiasm for your scholastic endeavors;
- You must have an active lifestyle both in terms of sports and a love of nature;
- You must have an interest in the arts;
- You must have perseverance through personal challenges and a demonstrated love for your province and country.

Selection Committee:

The selection process is as follows: There is a sub-committee formed, consisting of members of the Board of Trustees of the Queen of Angels Academy Foundation and the QAA Academic Liaison Officer. The Selection Committee will consult with staff members representing the Athletics Department and the Art Department. All applications are numbered and no names appear. This is done in a fashion that is fair to all concerned.



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The complete application package must be handed in **no later than May 18, 2012**. Your application is to be sent to:

The Jennifer Robertson Memorial Scholarship
The Queen of Angels Academy Foundation
100 Bouchard Blvd.
Dorval, QC H9S 1A7

If you have any questions concerning your application, contact
Margaret Buzas, QAA Academic Liaison Officer, at Tel: (514) 636-0900 ext.238 or e-mail
buzas.m@qaa.qc.ca
or
Judy Frederick, QAA Foundation Coordinator, at Tel: (514) 636-0900 ext.255 or e-mail
frederick.j@qaa.qc.ca

Regards and Best of Luck!

A handwritten signature in black ink that reads "Margaret Buzas". The script is cursive and fluid.

Margaret Buzas
QAA Academic Liaison Officer



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SECTION 1

Personal and Academic Information

(PLEASE PRINT)

Family Name at Birth: _____

Given Name: _____

E-mail Address: _____

Date of Birth

(mm/dd/yyyy): _____

Current Address: _____

Street

Apt. _____

City

Province _____

Postal Code

Tel: _____

**CEGEP you are
planning to attend:** _____

Program: _____

SECTION 2

Personal Statement

Candidates will prepare and submit, as an integral part of the application, a Personal Statement (maximum 300 words) to include the following information:

- your specific academic goals;
- include any relevant experience gained to date through community oriented volunteer experiences;
- include any relevant experience gained to date through leadership experiences and challenges;
- discuss the influence of your experience(s) at Queen of Angels Academy on your accomplishments and plans after graduating.

Your Personal Statement must be typed, double spaced and submitted with the Application Form.



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SECTION 3		Letter of Recommendation - ONE	
Please Note:	The Jennifer Robertson Memorial Scholarship Selection Committee relies on the supporting document supplied by someone who is personally and/or professionally familiar with the candidate (preferably not a present teacher). Please return your response (on your organization's letterhead) in the enclosed self-addressed envelope BEFORE May 18, 2012.		

PART A	CANDIDATE INFORMATION
Applicant's Family Name:	_____
Given Name(s):	_____

PART B	RECOMMENDATION
1	How long have you known the candidate, and in what capacity? _____ _____
2	With what aspect(s) of the candidate's activities and performance are you most familiar? Please be specific and elaborate on information helpful to the Selection Committee. _____ _____
3	Why do you consider the candidate to be a worthy recipient of this Scholarship? _____ _____ _____

**Please feel free to attach a separate page consisting of additional comments.
Thank you for your time and the consideration you gave in submitting your recommendation.**

PART C	REFEREE INFORMATION
Name:	_____
Position:	_____
Address:	_____ _____
Telephone:	_____
Signature:	_____
Date:	_____



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SECTION 3		Letter of Recommendation - TWO	
Please Note:	The Jennifer Robertson Memorial Scholarship Selection Committee relies on the supporting document supplied by someone who is personally and/or professionally familiar with candidate (preferably not a present teacher). Please return your response (on your organization's letterhead) in the enclosed self-addressed envelope BEFORE May 18, 2012.		

PART A	CANDIDATE INFORMATION
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Applicant's Family Name: _____

Given Name(s): _____

PART B	RECOMMENDATION
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1 How long have you known the candidate, and in what capacity?

2 With what aspect(s) of the candidate's activities and performance are you most familiar? Please be specific and elaborate on information helpful to the Selection Committee.

3 Why do you consider the candidate to be a worthy recipient of this Scholarship?

**Please feel free to attach a separate page consisting of additional comments.
Thank you for your time and the consideration you gave in submitting your recommendation.**

PART C	REFEREE INFORMATION
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Name: _____

Position: _____

Address: _____

Telephone: _____

Signature: _____

Date: _____