

Cliff Charles Memorial Scholarship

(Strategic Scholarships)

Deadline for submission is August 31.



Cliff Charles was an employee in the Lac La Ronge Indian Band Post Secondary Program since the Band began administering this program from Indian and Northern Affairs Canada in 1992. Cliff strongly believed and advocated for higher/continued education for Band members. Mr. Charles had a Diploma in Power Engineering from SIAST, a Certificate and Diploma in Administration and was working on a Degree in Administration. He was one class short of a Degree at the time of his passing in September, 2002.

This scholarship is to encourage students to engage in studies, which directly contribute to the advancement of Indian self-government and economic-sufficiency.

All continuing LLRIB full-time Post Secondary students may apply for one of the three scholarships of \$1,000 based on transcripts from the last two academic semesters. Scholarships will be awarded according to the year that is completed. Year 4 students who have completed their program are ineligible to apply.



Criteria for the Cliff Charles Memorial Scholarship is as follows: academic grades for the fall and winter semesters, special significance of program enrolled in, volunteer work, leadership, financial need, and special circumstances in overcoming adversity. All awards will require a letter of application with 2 attached references.

Note: *The above scholarship is awarded annually in September for the previous academic year. *Scholarships are for full-time students only.

The Post Secondary Board will review all applications from students for incentives and scholarships annually. These scholarships will be awarded shortly after the deadline date.

FOR LAC LA RONGE INDIAN BAND MEMBERS ONLY

(Excerpt from the PSSSPH p.13)

Please print and fill out the next page if you are interested (Appendix F from PSSSPH).



APPENDIX F

LA RONGE INDIAN BAND POST SECONDARY EDUCATION



Scholarship Application

FOR LAC LA RONGE INDIAN BAND MEMBERS ONLY

STUDENT NAME:

DATE OF BIRTH:

STUDENT PHONE NUMBER:

STUDENT E-MAIL:

INSTITUTE:

INSTITUTE LOCATION:

NAME OF CERTIFICATION / PROGRAM:

HOW MANY YEARS IS YOUR PROGRAM:

WHAT YEAR ARE YOU CURRENTLY IN?

Cliff Charles Memorial Scholarship (Strategic) Jonas Roberts Scholarship (Academic Excellence)

Please attach extra pages if needed

What are your educational and career goals? _____

Describe the community service (volunteer) and extracurricular activities you have been involved with?

I declare that all the information provided is true and complete and I make this solemn declaration believing it to be true knowing that it is of the same force and effect as if under oath.

X

Student Signature

Date