TO ALL FACULTY MEMBERS:

A $6,000 Scholarship for your brightest and best student.

A Legacy Scholarship Trust Fund has been established by retired employees of the University of Regina to provide scholarships for students in their final year of a first undergraduate degree whose potential for graduate work has come to the attention of faculty members. Former recipients of this award are eligible for consideration for a second award to provide support for their first year of graduate studies at the University of Regina. (Please note that nominations for a follow-up award must be made by a Faculty member who is in the student’s proposed graduate department or academic unit.)

Up to three scholarships of six thousand dollars will be awarded this year.

Your students cannot apply themselves.

It is a requirement of these scholarships that appropriate students be selected by FACULTY MEMBERS who must submit the nomination form.

THIS YEAR’S DEADLINE IS: FEBRUARY 18, 2020

Copies of the nomination package may be downloaded from the URAAPA website:

www.uraapa.uregina.ca
Terms of Reference – Undergraduate Award

Conditions of Eligibility:

1. The award is tenable only at the University of Regina.

2. The award will be made to a student who is enrolled in at least 12 credit hours per semester, and who has at the end of the 2019 fall semester completed at least 75 credit hours of his/her University of Regina undergraduate degree program. A minimum of 45 credit hours must have been completed at the University of Regina with a minimum cumulative grade point average (CGPA) of 75%.

3. A scholarship awardee must be in the final year of his or her first undergraduate degree in the 2020/21 academic year.

4. Failure to enrol in at least 12 credit hours in each semester of the final year of study may be cause for forfeiture; however, Co-op Work Term, Actuarial Science Internship and Practicum features of a course will be given full consideration.

5. The Legacy Scholarship is a referred award, and applications will not be accepted from students. Only University of Regina faculty members may initiate applications, based on their knowledge of the student.

Please Note: A faculty member may recommend only one student in any year.

Award Considerations:

1. Recommending faculty shall be well acquainted with the student’s theoretical and practical ability in the major field(s) of choice.

2. The award will be based on the following:

   (a) Excellence in scholarship in the chosen field or fields. The nominating faculty member should indicate characteristics which make the student stand out, such as evidence of superior intellectual ability, quick comprehension of difficult new concepts, initiative in class/lab work, excellence in written reports/essays, and promise as a potential graduate student.

   (b) Demonstrated competence in other areas of study.
Terms of Reference (continued) – Undergraduate Award

Duties of the Nominating Faculty Member

1. Inform the student candidate of this nomination and conditions of the award.

2. Complete the Nomination Form “student information” and “Faculty member recommendation pages”, including signatures as indicated, with the date.

3. Have the student provide you with a document of no more than two pages in length, written in paragraph form, which outlines the student’s extracurricular activities both past and present, future academic and career goals, how the scholarship money will be used, and any other pertinent information about themselves, and attach it to your submission.

4. Have the student provide you with an unofficial transcript and attach it to your submission.

5. Have the student arrange to have two reference letters from individuals who are not the nominator, including at least one from someone who is not a faculty member in the student’s major area of study. These letters should be submitted as confidential reports directly to The Legacy Scholarship Committee c/o Student Awards and Financial Aid Office.

This year’s APPLICATION DEADLINE is FEBRUARY 18

UNDERGRADUATE APPLICATION CHECKLIST

- The student will be an undergraduate in the academic year 2020/21.
- Please review the Conditions of Eligibility and Award Considerations on page 1.
- Please complete all 3 nominating faculty member duties listed at the top of this page (page 2).
- Please complete the Nomination Form for the Undergraduate Award.

Application material should be mailed to:

The Legacy Scholarship Committee  
C/o Student Awards and Financial Aid Office  
Rm 108, Administration-Humanities Building  
University of Regina  
Regina, SK  S4S 0A2
Nomination Form – Undergraduate Award
(student information)

Name of Nominee:______________________________________________________________

Address of Nominee:________________________________________________________________________

Telephone Number of Nominee:_________________  Faculty of Nominee:_________________

Degree & Major being pursued by Nominee:_____________________________________________________

Is the Nominee in the Co-op Work Term, Actuarial Science Internship, or Practicum Program?________

If YES, please indicate the two or three semesters in which the Nominee will complete his/her academic program_______________________________________________

Will either of the final two or three semesters involve a Co-op Work Term, Actuarial Science Internship, or Practicum Program? __________

If YES, please indicate which semester(s):______________________________________________

Current CGPA of Nominee: __________  Number of Credit Hours successfully completed: _______

Nominee declaration and signature

I hereby make the following declaration:

- That the information given by me on the attached pages is true to the best of my knowledge
- That I understand that value of this award, and policy and procedures with regard to the administration of this award for which I have applied, may change at the University’s discretion

Signature: ___________________________         Date: __________________

(Nominee’s Signature)        (Today’s date)

The University of Regina collects and creates information about students (“personal information”) under the authority of The University of Regina Act and in accordance with The Local Authority Freedom of Information and Protection of Privacy Act for purposes of admission, registration, and other decisions on students’ academic status, and the administration of the University and its programs and services. Legacy Scholarship Selection Committee members are University of Regina retirees and are external donors to the University of Regina. As such, the University of Regina requests that nominees sign the waiver below to allow their names to be included in the award selection information provided to the Committee.

The disclosure is voluntary, and if you choose not to sign the release below, you will be given equal consideration in the selection process, as your name will be redacted from the award selection information provided to the Committee.

I, the undersigned, give the University permission to include my name in the award selection information provided to the Committee:

Signature: ___________________________         Date: __________________

(Nominee’s Signature)        (Today’s date)
Nomination Form – Undergraduate Award
(Faculty member recommendation)

Name & Faculty of Nominator:____________________________________________________

Please include a statement of the characteristics which make the student outstanding.
(Evidence of intellectual ability, quick comprehension of new concepts, initiative in class/lab work, excellence in written reports/essays, promise of a potential graduate student.)
If additional space is required, please attach additional sheet(s).

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Nominator declaration and signature

I hereby make the following declaration:

- That the information given by me on the attached pages is true to the best of my knowledge
- That I understand that value of this award, and policy and procedures with regard to the administration of this award for which I have nominated the student, may change at the University’s discretion

Signature: ______________________________________         Date: __________________
(Nominator’s Signature) (Today’s date)
Terms of Reference – Graduate Award

Conditions of Eligibility:

1. The award is tenable only at the University of Regina.

2. The award will be made to students who are former recipients of a Legacy Scholarship Undergraduate Award and who are enrolling in their first year of graduate studies of a Masters or Doctoral program at the University of Regina, with a minimum cumulative grade point average (CGPA) of 80% in their chosen field of study.

3. Failure to enrol as a full time graduate student in each semester of the first year of graduate studies may be cause for forfeiture.

4. The Legacy Scholarship is a referred award, and applications will not be accepted from students. Only a Faculty member who is in the student’s proposed graduate department or academic unit may initiate an application.

Please Note: A faculty member may recommend only one student in any year.

Award Considerations:

1. Recommending faculty shall be well acquainted with the student’s theoretical and practical ability and potential as a graduate student.

2. The award will be based on the following:

   (c) Excellence in scholarship in the chosen field or fields. The nominating faculty member should indicate characteristics which make the student stand out, such as evidence of superior intellectual ability, quick comprehension of difficult new concepts, initiative in class/lab work, excellence in written reports/essays, and promise as a potential graduate student.

   (d) Demonstrated competence in other areas of study.
Duties of the Nominating Faculty Member

1. Inform the student candidate of this nomination, conditions of the award, and encourage the student to seek additional letters of recommendation and have them submitted in the form of confidential reports to the Legacy Scholarship Committee.

2. Have the student provide you with the following information in writing to be attached to this nomination form:
   (a) Future academic and career goals and how the scholarship money will be used
   (b) Any other pertinent information about themselves
   (c) Sign and date the attached declaration form and attach it to the nomination package

3. Have the student provide you with an unofficial transcript to be attached to the application form.

This year’s APPLICATION DEADLINE is FEBRUARY 18

GRADUATE APPLICATION CHECKLIST

- The student is a previous recipient of the Legacy Scholarship and in the academic year 2020/21 will be enrolled in the first year of graduate studies at the University of Regina.
- Please review the Conditions of Eligibility and Award Considerations on page 1.
- Please complete all 3 nominating faculty member duties listed at the top of this page (page 2).
- Please complete the Nomination Form for the Graduate Award.

Application material should be mailed to:

The Legacy Scholarship Committee
C/o Faculty of Graduate Studies & Research
Paskwâw Tower 110.2
University of Regina
Regina, SK S4S 0A2
Nomination Form – Graduate Award
(student information)

Name of Nominee:______________________________________________________________
Address of Nominee:____________________________________________________________
Telephone Number of Nominee:_________________  Faculty of Nominee:_________________
Degree being pursued by Nominee:_________________________________________________
Department (or Academic Unit):_________________________________________________
Current CGPA of Nominee: __________
Number of Credit Hours successfully completed: __________

Nominee declaration and signature

I hereby make the following declaration:

• That the information given by me on the attached pages is true to the best of my knowledge
• That I understand that value of this award, and policy and procedures with regard to the administration of this award for which I have applied, may change at the University’s discretion

Signature: ______________________________________         Date: __________
            (Nominee’s Signature)         (Today’s date)

The University of Regina collects and creates information about students (“personal information”) under the authority of The University of Regina Act and in accordance with The Local Authority Freedom of Information and Protection of Privacy Act for purposes of admission, registration, and other decisions on students’ academic status, and the administration of the University and its programs and services. Legacy Scholarship Selection Committee members are University of Regina retirees and are external donors to the University of Regina. As such, the University of Regina requests that nominees sign the waiver below to allow their names to be included in the award selection information provided to the Committee.

The disclosure is voluntary, and if you choose not to sign the release below, you will be given equal consideration in the selection process, as your name will be redacted from the award selection information provided to the Committee.

I, the undersigned, give the University permission to include my name in the award selection information provided to the Committee:

Signature: ______________________________________         Date: __________
            (Nominee’s Signature)         (Today’s date)
Nomination Form – Graduate Award
(Faculty member recommendation)

Name & Faculty of Nominator:____________________________________________________

Please include a statement of the characteristics which make the student outstanding.
(Evidence of intellectual ability, quick comprehension of new concepts, initiative in class/lab work, excellence in written reports/essays, promise of a potential graduate student.)
If additional space is required, please attach additional sheet(s).

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Nominator declaration and signature

I hereby make the following declaration:

• That the information given by me on the attached pages is true to the best of my knowledge
• That I understand that value of this award, and policy and procedures with regard to the administration of this award for which I have nominated the student, may change at the University’s discretion

Signature: ___________________________________________  Date: ________________
(Nominator’s Signature)  (Today’s date)