



# Park West School Division

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## The Lauman Memorial Fund

Applications are now being accepted until **November 14<sup>th</sup>, 2016**. To be eligible, the applicant must:

- 1) be a Canadian citizen or landed immigrant;
- 2) be a graduate of one of the following High Schools: Birtle Collegiate, Decker Colony, Hamiota Collegiate, Shoal Lake School, or Strathclair School;
- 3) have been a resident of Park West School Division and a student of the above schools for a minimum of two years;
- 4) be a student taking a full course of studies at a University, Community College or School of Nursing where the program of studies is two years or longer.  
*A letter from the educational institution confirming full time enrolment is required;*
- 5) along with the application provide official academic standing (official transcript which clearly states cumulative GPA and your school's highest possible GAP)  
**Marks statement MUST be official – web transcripts will not be accepted.**
- 6) an applicant may apply twice:
  - a) once in second or third year of studies;
  - b) once in fourth or fifth year of studies.

\*\*\*\* Applicants must clearly state which year of studies they are currently in \*\*\*\*

Submit your application with documentation to:

Lauman Memorial Fund Advisory Committee  
c/o Park West School Division  
P.O. Box 68  
Birtle, Manitoba R0M 0C0  
Email: [tthompson@pwsd.ca](mailto:tthompson@pwsd.ca)  
Phone: 204-842-2102  
Fax: 204-842-2110

**Emailed applications are preferred**

**THE LAUMAN MEMORIAL FUND  
SCHOLARSHIP APPLICATION FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

S.I.N.# \_\_\_\_\_

1. Are you a Canadian citizen? [ ] Yes [ ] No

Are you a landed immigrant? [ ] Yes [ ] No

2. From which qualifying school did you graduate? \_\_\_\_\_

3. What year did you graduate? \_\_\_\_\_

4. How long have you been a resident of the Park West School Division? \_\_\_\_\_

5. How long have you been a student of the qualifying schools? \_\_\_\_\_

6. Where are you currently a student? \_\_\_\_\_

7. What is your program of studies? \_\_\_\_\_

8. How long is your program of studies? [ ] less than two years  
[ ] two years or more

9. What year of studies are you in? \_\_\_\_\_

10. Please provide an official marks statement which clearly states your cumulative GPA and your school's highest possible GPA. **Marks statement MUST be official – web transcripts will not be accepted.**

11. If you have previously received this scholarship, please indicate when: \_\_\_\_\_

12. Please submit a letter from your education institution confirming full time enrolment.

I certify that the information I have provided is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit your application complete with documentation to:

**Lauman Memorial Fund Advisory Committee  
c/o Park West School Division**

**P.O. Box 68**

**Birtle, Manitoba R0M 0C0**

**Email: [tthompson@pwsd.ca](mailto:tthompson@pwsd.ca)**

**Phone: 204-842-2102 Fax: 204-842-2110**

**Application deadline is November 14<sup>th</sup>, 2016**

**Emailed applications are preferred**