Student Leader Entrance Scholarship

Two awards of $1000

Awarded to newly admitted UofT Mississauga students who have attained high academic achievement in high school and have demonstrated leadership through their involvement in high school activities.

Applicant Information

Surname

First Name

Email Address

University of Toronto Student Number

Checklist:

- Attending full-time studies at UofT Mississauga in September 2020
- Attained high academic achievement (80%+) in Grade 12U/M equivalent courses
- Attached a 1-2 page summary of extra-curricular high school activities including the time periods and number of hours you spent in each activity. Outline that includes:
  - Each organization (name, address, etc.)
  - Your activities/participation/position within each organization
  - Total hours or average hours per week
  - Months and/or years of your direct involvement
- Attached a 1 page statement of how your leadership qualities and achievements have significantly contributed to your high school
- Completed Checklist (page 1), References and Declaration (page 2)
- Submit completed applications electronically no later than October 15th, 2020.

Completed applications along with all required supporting documentation should be emailed to awards.utm@utoronto.ca. Where possible, please print the application, sign the declaration in ink (wet signature), scan and email to the Awards Office. If you are unable to sign in ink, electronic signatures will be accepted. All submission must be sent from your utoronto email account.
**References:**

List two individuals who can attest to your extra-curricular High School activities. Letters of recommendation are **not** required from these individuals; however, you may include them with this application if you wish.

1. ___________________________  __________________________________
   Name                                                     Position
   __________________________________________________________
   Organization                                              Phone Number

2. ___________________________  __________________________________
   Name                                                     Position
   __________________________________________________________
   Organization                                              Phone Number

**Declaration:**

I hereby certify that I have read the information regarding the protection of my privacy and that the information provided in and with this application is, to the best of my knowledge, true and complete. I also authorize the release of the information contained herein to the appropriate Scholarship Selection Committee.

__________________________________________________________   _____________
Signature                                                     Date

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