

# Women and Gender Studies Prize

Awarded to a full-time or part-time UofT Mississauga student, enrolled in a major or a minor in the Women and Gender Studies program who self-identifies as either Indigenous or Black and has demonstrated financial need.

## Applicant Information

\_\_\_\_\_  
Surname

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Student Number

### Checklist:

- ☐ Registered full-time or part-time at UofT Mississauga for the 2022-23 academic year
- ☐ Have demonstrated financial need by qualifying for OSAP assistance for 2022-2023 Fall/Winter session
  
- ☐ I wish to self-identify as an Indigenous student. Aboriginal and treaty rights of Indigenous peoples of Canada are recognized and affirmed in the Constitution Act of 1867 and 1982 (section 35). Section 35(2) indicates Indigenous people include First Nation, Inuit and Métis people
  
- OR
  
- ☐ I wish to self-identify as a Black student
  
- ☐ Attached a ½ -1 page personal statement explaining what area of your undergraduate study have you found particularly interesting and fruitful? In addition, you can include what it means to you to receive this prize, your community/volunteer involvement and your extracurricular activities.
  
- ☐ Completed Checklist (on page 1) and Declaration (on page 2)
- ☐ Submit completed applications electronically no later than **November 15<sup>th</sup>, 2022**. Completed applications along with your personal statement can be emailed to [awards.utm@utoronto.ca](mailto:awards.utm@utoronto.ca). Where possible, please print the application, sign in ink (wet signature), scan and email. If you are unable to sign in ink, electronic signatures will be accepted. **All submissions should be sent from your utoronto email account.**

The successful applicant(s) will be notified by email.

## **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.

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**Signature****Date**

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