Financial Aid and Awards Office

Undergraduate Award Bulletin Susan Levin-Woods Scholarship

The Susan Levin-Woods Scholarship was established through the generosity of Mrs. Susan Levin-Woods, a graduate of Concordia University.

Eligibility Requirements:

- This scholarship is open to female Canadian citizens only, who have demonstrated excellence in her studies.
- Applicants must be pursuing a degree in any area of study at Concordia University on a full-time or part-time basis while following a career path or bringing a family.
- Applicants must have successfully completed **at least thirty (30) credits at Concordia** towards their current degree of study (transfer credits from other institutions are excluded).
- Applications must have an Assessment GPA of at least 3.30

Award Value: One award available valued at \$2,000

How to Apply:

Students wishing to be considered for this scholarship must submit, along with their application form:

• A personal statement (500 to 700 words) explaining why you returned to studies (whether full-time or part-time) and what your personal, professional, and academic objectives are.

To submit your application, **all** documentation must be securely uploaded through your Student Centre. Detailed instructions on the process can be found at the following link: https://www.concordia.ca/students/financial-support/scholarships-awards/upload-process-for-concordia-

application-based-awards.html

Please send an email notification to oliviajade.tribert@concordia.ca once your documents are uploaded.

Application Deadline: October 14, 2022, at 5:00 p.m.

For more information on our Application-Based Awards, visit the Financial Aid and Awards Office website: https://www.concordia.ca/students/financial-support/scholarships-awards/internal.html



Susan Levin-Woods Scholarship Application Form 2022-2023

APPLICANT'S PERSONAL INFORMATION (Please print clearly)	
Family Name:	Given Name:
Student I.D.:	Social Insurance Number://
E-Mail Address:	Date of Birth (MM/DD/YYYY):
Current Address: Street	Apartment Apartment
City	Province
Postal Code	Telephone: Home ()
Is this your Parent's Address?	Work ()
·	ried Divorced Separated
Number of Dependent Children You Have:	Their Ages:
[Please provide a copy of child(ren)'s birth certificate(s)]	
Your Faculty of Study:	Department:
REQUIRED CANDIDATE STATEMENT:	
Please include with your application form a written statement (500 to 700 words) explaining why you returned to studies (whether full-time or part-time) and what your personal, professional, and academic objectives are.	
In submitting my application, I understand that, in the event I am selected to receive this scholarship, my name and program will be provided to the donor(s) of the scholarship as part of the University's annual donor reports, and that the information contained in my University application and in the present application may be used in the University's marketing materials and publications.	

_ DATE: ____

STUDENT SIGNATURE: _____