

**ST. JAMES SCHOLARSHIP FOUNDATION INDIGENOUS LEADERSHIP AWARD**

**\*FOR AN INDIGENOUS STUDENT GRADUATING FROM GRADE 12 IN ST. JAMES-  
ASSINIBOIA SCHOOL DIVISION\***

**\*MUST BE CONTINUING IN SOME FORM OF POST-SECONDARY EDUCATION\***

NAME: \_\_\_\_\_

(first)

(middle)

(last)

HOME ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

WHAT INSTITUTION / PROGRAM WILL YOU BE ATTENDING? \_\_\_\_\_

\_\_\_\_\_

Please answer the questions below:

How do you identify as an Indigenous person and how has it shaped who you are?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe your extracurricular activities and community leadership (volunteer experience for example).

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**Please outline your educational goal(s) for the future.**

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**Please describe any social or financial hardship you have faced/are facing, and how this scholarship will support you in reaching your goals for the future.**

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