

**MANITOBA YOUTH LEADERSHIP SCHOLARSHIP/
PREMIER'S HEALTHY LIVING AWARD FOR YOUTH**



**APPLICATION FORM 2011/12
Deadline: March 23, 2012**

Student Information:

First Name:		Mailing Address: P.O. Box if Applicable	
Last Name:		City/Town:	
Grade:		Postal Code:	
Primary Phone #:		Alternate Phone #:	
E-mail Address:			
How did you hear about this program?			

School Information:

School Name:		Phone #:	
Address:		Fax #:	
City/Town:		School Division:	
Postal Code:		Principal's Name:	
School contact if other than principal:			
E-mail address of school contact:			

Volunteer Activity Information:

Complete the information below for the organization(s) where the volunteer work was done. **Volunteer work must be between September 1, 2010 and March 23, 2012.**

Organization	Contact Person	Phone #	When did you volunteer? (month/year)	Total Hours Volunteered

Would you like to be considered for the Premier's Healthy Living Award for Youth? Yes No

Please include a separate one to two page description of the volunteer work listed above.

Information must include:

- 1) what kind of volunteer work you did;
- 2) where you volunteered;
- 3) who you worked with;
- 4) the impact your work had including the number of people who benefited;
- 5) how your work addressed the selection criteria as outlined on the information folder; and
- 6) your commitment to healthy living in your community (optional - only required if you would like to be considered for the Premier's Healthy Living Award for Youth).

Volunteer Work Reference(s) and Verification:

A reference letter from each organization where the volunteer work was done (listed above) **must be included and signed by the contact person**, verifying the information described by the student. The reference letter can also add any comments in support of the value of the student's volunteer work.

Principal Verification:

Were the volunteer hours listed by the student used towards any Senior Years Credits? Yes No

If yes, how many hours were used for credits? _____

I hereby verify that the student named in this application is enrolled as a Grade 12 student in this school and is eligible to graduate this school year.

Signature of Principal: _____

Student Verification:

I, (*undersigned*), verify that the information submitted herein is accurate and I understand that if awarded a scholarship, the \$500 will be paid to me upon submission of proof of registration at a post secondary institution as well as proof of payment of at least \$500 in fees.

Signature of Student: _____