

## **City of Corner Brook Entrance Achievement Award**

Donor: City of Corner Brook  
Number of Awards: One  
Value: \$1000  
Criteria: The City of Corner Brook Entrance Achievement Award is awarded annually to a resident of the City of Corner Brook entering the first year of full-time study at College of the North Atlantic, Corner Brook Campus. This award is a tangible sign of the City's support of College of the North Atlantic, Corner Brook Campus.

The award will be made upon application to a student of outstanding academic excellence and promise, who has demonstrated active participation in school and community life. Students should have at least a 75% high school average to be considered.

**An application form, a College Reference Form, a College & Community Volunteer Activities Form and a high school transcript are required. Deadline for applications is mid-January. Please see application form for exact date. Application forms are available on the College website.**

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**Please see application on next page.**



# City of Corner Brook Entrance Achievement Award Application Form

Completed applications must be submitted to the Student Services Office/  
Student Development Officer College of the North Atlantic, Corner Brook Campus  
by January 24, 2022

Name:	_____	Student #:	_____
Address:	_____		
Phone #:	_____		
E-mail:	_____		
Program:	_____		
Campus:	_____ <b>Corner Brook</b> _____		

### Applicant Checklist:

1. Please ask someone who has known you for at least two years, and is not a member of your family, to complete the **College Reference Form**, and attach it to your application.
2. Please attach a copy of your **High School transcript**.
3. Please complete and attach a **College & Community Volunteer Activities Form**

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### INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

### I hereby make the following declaration:

1. I intend to be a full-time student for the academic year/semester in which this application is made.
2. I have answered all questions, which are applicable to me, and the answers given by me are true.
3. I understand that if selected for an award / scholarship / bursary I will be required to provide my Social Insurance Number, so that a T4A may be issued for income tax purposes.

Permission is hereby granted for the Awards Committee to obtain any further information required from appropriate individuals or agencies.

I further acknowledge that my personal information (i.e. photo, video, name, program and home community) may be shared with the donor of this award and can be used by CNA for promotional purposes.

College of the North Atlantic is an educational body of the Government of Newfoundland and Labrador, and is therefore subject to the Access to Information and Protection of Privacy Act, 2015 (ATIPPA). The college's Student Services Department and the Alumni & Advancement Office are collecting your personal information to process the scholarship application. The personal information you provide may be disclosed to the donor. This personal information is collected under the authority of the College Act 1996 (SNL1995, Chapter C-22.1). Collected personal information will be stored in accordance with our normal network and information security measures. For further information about the collection and use of this information please contact the Provincial Awards Chairperson at 709-643-7880. For more information about the ATIPPA please visit [www.cna.nl.ca/about/atippa.asp](http://www.cna.nl.ca/about/atippa.asp).

*I have read and understand the Privacy Statement above and consent to the collection and use of this personal information.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date