

# Don Lindsay Legacy Award

Don Lindsay is the former President and CEO of Teck Resources Ltd, a position he held from 2005 to 2022. Under his leadership, Teck transformed into a global leader in responsible resource development, achieving significant, sector-leading growth and financial performance. Don's commitment to health, safety and sustainability has left a lasting impact on the company's culture and operations.

Early in his career, Don worked at the Iron Ore Company of Canada in Labrador City, where he started as a foreman and later became involved in mine planning and design. This experience in Labrador was foundational to his understanding of the mining industry and helped shape his future endeavors.

To give back to the place where he began his professional journey, Mr. Lindsay has established the **Don Lindsay Legacy Award**. This award provides comprehensive financial support to selected Menihek High School students attending a full-time program at any campus of College of the North Atlantic, or a public Canadian university. Mr. Lindsay's legacy continues to inspire and shape the future of leadership in Canada through his dedication to education and responsible resource development.

**Donor:** Don Lindsay Legacy Fund

**Number of Awards:** Varies annually

**Value:** Varies annually

*The award covers all institution managed fees associated with the program or degree identified on application. This includes tuition, compulsory fees, books, health and dental fees and school-operated residence fees (excluding meals).*

**Criteria:**

- Available to full-time students entering their first year of study in any certificate, diploma or degree program at College of the North Atlantic or a public Canadian university.
- Applicants must be a resident of Newfoundland and Labrador.
- Applicants must be a citizen or permanent resident of Canada.
- Applicants must be in their final year of Menihek High School, Labrador City.
- Applicants must provide confirmation of acceptance at CNA or a Canadian University for the Fall semester.
- This award will be given in recognition of a variety of qualities: Passion for learning, exceptional academic achievement, demonstrated initiative, significant contribution to high school activities, exceptional work ethic with a positive attitude, willingness to help others, strong desire to succeed and exemplary leadership skills.
- Recipients must continue to maintain full-time status and clear academic standing each semester of the program (per policy and standards of the institution the recipient is attending).
- Recipients are eligible for multi-year funding, referred to as renewals. Renewal of this award is contingent upon maintaining clear standing as outlined by the regulations of the college or university. Recipients must adhere to all academic and conduct standards specified by the institution to remain eligible for continued support.
- Recipients must remain in their CNA program or University degree as outlined in their initial application (exception: CNA bridging programs).

**Deadline:** July 27, 2025

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# Don Lindsay Legacy Award

Administered by College of the North Atlantic

Application must be received by Student Services office by **June 27, 2025**

**Applicant Checklist:**

- ☐ Confirmation of acceptance to CNA or a Public Canadian University.
- ☐ Reference is completed and sent to Awards Office or attached to application.
- ☐ Volunteer and Activities section are completed.
- ☐ High School transcript or current grades is attached.

Name: \_\_\_\_\_Student #: \_\_\_\_\_

Address: \_\_\_\_\_E-mail: \_\_\_\_\_

City: \_\_\_\_\_Prov: \_\_\_\_\_Postal Code: \_\_\_\_\_

Institution: CNA ☐ Canadian University (name) \_\_\_\_\_

Program: \_\_\_\_\_Campus: \_\_\_\_\_

Year of Program: 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐Phone #: \_\_\_\_\_

Graduated from Menihek High School ☐Date of high school completion: \_\_\_\_\_

Residence Yes ☐ No ☐ If yes, name: \_\_\_\_\_

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**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

The application form and all required documents must be sent by **June 27, 2025**, to:

**Provincial Awards Office**  
College of the North Atlantic  
P.O. Box 5400  
Stephenville, NL, A2N 2Z6

Email completed applications to: **HQAwardsOffice@cna.nl.ca**

**I hereby make the following declaration:**

- 1. I intend to be a full-time student for the academic year/semester for 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, 432 Massachusetts Dr. P.O. Box 5400 Stephenville, NL A2N 2Z6. For more information about the ATIPPA please visit [www.cna.nl.ca/about/atippa.asp](http://www.cna.nl.ca/about/atippa.asp).*

\_\_\_\_\_  
Name: Print or Sign

\_\_\_\_\_  
Date



# Don Lindsay Legacy Award

## Volunteer and Activities

Applicant Name: \_\_\_\_\_

Please list volunteer, community and/or high school activities  
(May include volunteer work, involvement with committees and/or organizations and sports/teams)

Name of Organization/ Group & contact person	Activity (briefly describe your role)	Time Commitment	Start Date dd/mm/yr	End Date dd/mm/yr
		One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/>		
		One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/>		
		One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/>		
		One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/>		
		One Time <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/>		

Explain what qualities you have that make you a worthy candidate for the Don Lindsay Legacy Award and how it will help you with your educational pursuits. (Max 150 words)

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## Reference

Applicant Name: \_\_\_\_\_

Reference should not be a relative of the applicant.

Please return to student (applicant) to include with their application or send directly to the Awards Office at [HQAwardsOffice@cna.nl.ca](mailto:HQAwardsOffice@cna.nl.ca).

**Deadline Date: June 27, 2025**

This award will be given in recognition of a variety of qualities: passion for learning, exceptional academic achievement, demonstrated initiative, significant contribution to high school activities, exceptional work ethic with a positive attitude, willingness to help others, strong desire to succeed and exemplary leadership skills.

Relationship to applicant:

Teacher ☐      Employer/Supervisor ☐      Other: \_\_\_\_\_

How long have you known applicant?

0-3 years ☐      3-6 Years ☐      6-10 years ☐      10+ Years ☐

**In your opinion, why should this student be selected as a recipient of the Don Lindsay Legacy Award?** *Please comment on the above qualities of the applicant.*

*(If preferred, you may attach a typed written letter)*

Reference Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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