DR. ROSE LENSER FIRST NATIONS INTO SCIENCE SCHOLARSHIP

SPONSOR: Dr. Rose Lenser is a family physician currently practicing in Victoria, B.C.

She was born and raised in Northwestern B.C. (Terrace) where she graduated from high school. She received a Bachelor of Science [Biology] degree at Concordia University in Montreal and received her Doctor of Medicine degree from the University of British Columbia in 1999. Dr. Lenser is proud of her Wetsuwetan heritage and is a member of the

Squamish Nation.

NUMBER: One

VALUE: \$1000

TENURE: Any full-time program aiming for a degree in Science or Health Careers at a

recognized institution.

CRITERIA: 1. Indigenous student from the Greater Victoria School District.

2. Graduating Grade 12 student.

3. Good grades in the Sciences.

DEADLINE: Friday, May 5, 2023

PROCEDURE: 1. Obtain an application on-line at:

https://ied.sd61.bc.ca/graduation/greater-victoria-sd61-scholarships/

or from the Indigenous school Counselor.

2. Include with the completed application:

a) Transcript of marks for current school year

b) Letter of recommendation from a teacher

3. Forward application and supporting documents to the Indigenous

Education Office or school-based Counselor.

ADDRESS: MAILING ADDRESS:

Indigenous Education Office Greater Victoria School District

556 Boleskine Road Victoria, BC V8Z 1E8

TELEPHONE: [250] 475-4124 EMAIL: cclaibourne@sd61.bc.ca

SELECTION: Dr. Rose Lenser

PR. Rose Lenser First Mations Into Science Scholarship 2023

Please return completed form to: INDIGENOUS EDUCATION

Greater Victoria School District 556 Boleskine Road Victoria, B.C. V8Z 1E8 *OR*

School-Based Counselor

DEADLINE FOR SUBMISSION OF APPLICATION:

Friday, May 5, 2023

Dr. Rose Lenser - 2023 First Nations into Science Scholarship Application

Name			Date of Birth				
	SURNAME	GIVEN NAME	Yr Mo. Day				
Address			Grade:	_			
City		Postal Code:	Tel:				
School		Tel:		_			
School Addres	s			_			
SIN:				_			
Aboriginal Ancestry/Band:							
EDUCATION (LIST LAST THREE SCHOOLS ATTENDED)							
NAME OF S	NAME OF SCHOOL LOCATION (CITY)		DATES				
LIST ALL COURSES YOU ARE TAKING THIS YEAR							

	HOOL, COMMUNITY & CULTURAL PARTICIPATION
*	In what organizations, clubs or social activities in the school or community have yo participated over the last three years?
PC	OST-GRADUATION CAREER PLAN
	OST-GRADUATION CAREER PLAN What is your Science/Health Careers career goal?
*	What is your Science/Health Careers career goal?
*	What is your Science/Health Careers career goal? What educational institute do you plan to attend next year?
*	What is your Science/Health Careers career goal?

	o letters of reference: One from a Scentor; the other letter, personal refere					
Please include a record of your marks for the 2022-2023 school year						
Please list the names of two people who would speak on your behalf if requested.						
NAME	ADDRESS	PHONE				
 Please submit a typed personal letter addressed to Dr. Rose Lenser, explaining why you feel you qualify as a candidate for this scholarship, and the role you will play in enhancing the image of Science or Health Careers. The sponsor of this scholarship chooses the successful candidate. If there is no suitable candidate, then no scholarship will be awarded. It is the responsibility of each candidate to ensure that the application is complete, and that all required information, documents and letters are enclosed with the application. 						
Scholarship must be claimed within two years of date of award.						
I understand that if I am the recipused in publications produced by	vient of this award, my name and pho the Greater Victoria School District.	otograph may be The publications				
DATE OF APPLICATION	SIGNATURE OF	F APPLICANT				