



Métis
Urban Housing
Corporation



Drayden Insurance Scholarship Nomination Application

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| STUDENT NAME: | |
| NOMINATOR'S NAME: | STUDENT'S COMMUNITY OF RESIDENCE: |
| NOMINATOR'S PHONE NUMBER: | NOMINATOR'S E-MAIL: |
| RELATIONSHIP TO STUDENT: (i.e., employer, teacher, supervisor) | HOW LONG HAVE YOU KNOWN THE STUDENT? |
| DESCRIBE THE STUDENT'S INVOLVEMENT IN AND CONNECTION TO THEIR MÉTIS COMMUNITY. | |
| TELL US WHAT YOU KNOW ABOUT THE STUDENT'S FINANCIAL NEED FOR FUNDING FOR POST-SECONDARY EDUCATION. | |
| WHAT QUALITIES OF THE STUDENT DO YOU FEEL MAKE THEM DESERVING OF THE DRAYDEN SCHOLARSHIP? | |
| IS THERE ANYTHING ELSE YOU WOULD LIKE TO TELL US ABOUT THIS STUDENT? | |
| NOMINATOR'S SIGNATURE: | DATE: |