[](http://www.bcatml.org/)

**BCATML Student Scholarship**

**Award Information**

To help promote the study of a second language and culture in British Columbia at a post-secondary level, the British Columbia Association of Teachers of Modern Languages is offering a scholarship for language students. The scholarship provides up to four (4) $500 awards for B.C. students who are continuing with second language studies at a post-secondary institution.

**Award Value $500**

**Deadline: May 1st**

**Academic Eligibility Criteria and Requirements**

Priority will be given to applicants who best meet the following criteria with supporting documentation:

* Canadian citizen or permanent resident
* Currently enrolled as a Grade 12 student at a public or independent school in BC
* Completed a Modern Language course at the Grade 11 or 12 level in BC
* Current secondary school transcript provided
* Evidence of registration in a Modern Language course in a post-secondary institution

**Application**

Please complete all sections of the application. PART A and PART B are to be completed by the Student Applicant. PART C is to be completed by the School Sponsor.

[](http://www.bcatml.org/)

**PART A: To be completed by the Student Applicant**

|  |  |
| --- | --- |
| Full Name of Student Applicant | SURNAME, GIVEN NAMES |
| Personal Education Number (PEN) |  | Date of Birth | \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_MM/DD/YYYY |
| Telephone Numbers |  (\_\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_ (\_\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_  |
| E-mail Address |  |
| Mailing Address | UNIT NUMBER, HOUSE NUMBER, STREET NAME |
| CITY/TOWN, POSTAL CODE |
| Post-secondary Institution |  | Period Attending |  |
| Citizenship Information | ▢ Canadian Citizen ▢ Permanent Resident (Landed Immigrant)CHECK ONE |
| Are you currently enrolled as a Grade 12 student at a BC public or independent school? | ▢ YES ▢ NOCHECK ONE |
| Languages(s) of Study and Grade(s) Received  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_% \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_%\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_% \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_% |
| Name of School Sponsor |  | Position |  |
| Email Address of School Sponsor |  |

[](http://www.bcatml.org/)

**PART B: To be completed by the Student Applicant**

**WRITTEN STATEMENT**

Please attach a written statement of up to 250 words in English, addressing the following question:

*Why is studying second languages important to you?*

**STUDENT TRANSCRIPT**

Please include an official or school copy of your Grade 11 or Grade 12 secondary school transcript with this application. Do not send the transcript separately from this application. Applications that do not include a transcript will not be considered.

▢ I have included with this application a copy of my Grade 11 or Grade 12 transcript.

**DECLARATION**

I HAVE READ AND UNDERSTOOD THE INSTRUCTIONS, AND DECLARE THAT:

1. All information provided is true and complete;
2. I will be a full-time student at the school named for the period stated and,
3. I will immediately notify the British Columbia Association of Teachers of Modern Languages in writing if I withdraw from full-time studies at that school.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Student Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Student Applicant Date Signed

[](http://www.bcatml.org/)

**PART C: To be completed by the School Sponsor**

**SPONSOR INFORMATION**

This portion is to be completed by the sponsor. The purpose of the collection is to determine the applicant’s eligibility for the scholarship. School sponsors must be the student applicant’s language teacher, vice principal or principal and must agree to nominate the student for the award. Each school may nominate up to two (2) applicants for this award. If the school is submitting multiple applications, please indicate below:

|  |  |
| --- | --- |
| Full Name of Student Applicant |  |
| Full Name of School Sponsor |  |
| Are you a current member of the BC Association of Teachers of Modern Languages? | ▢ YES ▢ NOCHECK ONE |
| Telephone Number of School Sponsor |  (\_\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_ |
| Email Address of School Sponsor |  |
| Name of School |  | Position |  |
| Name of School District or Independent School Authority  |  |

**REFERENCE LETTER**

Please include a reference letter (up to 250 words) in support of the student for this award.

**SUBMISSION INSTRUCTIONS**

Please email the entire application package to psac51@bctf.ca by **May 1st**.