



THE REVEREND JOHN C. MOLLOY MEMORIAL SCHOLARSHIP — \$2,500.00

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For a Campion College student in the final year of an Honours program in Psychology. Minimum U.G.P.A. for application is 75%, and the student must be registered in at least 12 credit hours a semester and must be seriously planning to continue a career in Psychology.

Please follow the instructions listed below:

- A. Please print or type.
- B. Return completed application form to the Office of the Registrar, Room 301, Campion College, University of Regina, Regina, Saskatchewan, S4S 0A2, by May 15.
- C. Submit the following along with this application form:
 - a) A letter of reference from a faculty member in Psychology
 - b) A personal letter outlining plans for the future, in particular your career goals regarding Psychology
 - c) A resumé

NOTE: Academic achievement will not be the sole criterion in the judging of applications, which will be the jurisdiction of a committee consisting of members of the Psychology Department of Campion College.

Name: _____
Last Name Given Names

Address: _____
No. Street Town/City Postal Code

Telephone Number: _____ Cell Phone Number: _____

E-mail address: _____

Date of Birth: _____
Yr/Mo/Day

Student Number: _____ Semester Hours Completed: _____

STATEMENT OF FINANCIAL NEED

Name of Parent or Guardian: _____

Address: _____
No. Street Town/City Postal Code

Occupation: _____
Father Mother

Number of Dependents in Family: _____

If you are married: Name of Spouse _____ Occupation _____

Number of Applicant's Dependents (if any): _____

Have you worked during the past year? If so:

Name of Employer: _____

Type of Work: _____

Full Time Part Time Other: _____

Dates of Employment: _____ Income: _____

Amount of Debts: \$ _____ Monthly Payments: \$ _____

ESTIMATED EXPENSES FOR
FALL AND WINTER SEMESTERS

Fees: \$ _____

Books: \$ _____

Board & Room: \$ _____

Recreation: \$ _____

Transportation:

To and from classes \$ _____

Home to Regina and return \$ _____

Other (specify): \$ _____

TOTAL \$

METHODS OF FINANCING

Parents/Guardian: \$ _____

Relatives/Friends: \$ _____

Spouse: \$ _____

Savings: \$ _____

Canada Student Loan: \$ _____

Scholarships/Bursaries (itemize)

_____ \$ _____

_____ \$ _____

_____ \$ _____

Other (specify): \$ _____

TOTAL \$

Date of Application

Signature of Applicant