

This scholarship recognizes and rewards Alberta post-secondary students for their academic achievements and encourages students to continue in their undergraduate or professional program of study.

# **Eligibility Criteria**

To be eligible an applicant must:

- be a Canadian Citizen, Permanent Resident, or Protected Person (visa students are not eligible),
- be an Alberta resident, and to be considered an Alberta resident one of the following conditions must apply:
  - one parent, or legal guardian has maintained permanent residence in Canada for at least twelve (12) consecutive months immediately prior to commencing post-secondary studies, or
  - Alberta is the last place the student has lived for twelve (12) consecutive months immediately prior to commencing post-secondary studies, or
  - the student's spouse/partner has maintained permanent residence in Alberta for twelve (12) consecutive months prior to the person attending post-secondary.
- be enrolled full-time in the second or subsequent year of an undergraduate program at a publicly funded post-secondary institution in Alberta,

 have achieved a minimum GPA of 3.2 on a 4.0 grade point average scale based on an 80% full course load in the previous fall and winter term.

Students are not eligible for a Jason Lang Scholarship if they:

- · are enrolled in a one year certificate program,
- do not return to a publicly funded post-secondary institution in the fall or winter of the next academic year,
- are recipients of a Louise McKinney Scholarship for the same period of study, or
- have received the lifetime maximum of three Jason Lang Scholarships.

Note: A term is defined as a study period of up to 17 weeks in length. Co-op work terms/internships/exchange programs may be eligible as long as these programs are a mandatory component of the undergraduate or professional program.

### Selection Process

Students who meet the eligibility criteria are nominated by the Student Awards Office at the publicly funded post-secondary institution in Alberta where they currently attend. If the student has transferred from another publicly funded post-secondary institution, the institution they currently attend will confirm the previous year's eligibility criteria.

# **Additional Information**

Students must contact their schools for application deadline dates. Be aware that some student deadlines may be months before the school submission deadlines.

| Alberta Student Number (ASN)  | Deadline and How to Apply   |
|---|---|
| <ul> <li>Your Alberta Student Number is on your Alberta Transcript</li></ul>  | <ul> <li>Application Deadline:</li> <li>Submit application to: Post-Secondary Institution Student</li></ul>   |
| for High School Achievement. <li>If you do not know your ASN, or do not have an ASN:</li> <li>Visit learnerregistry.ae.alberta.ca for instructions.</li> <li>Call toll-free in Alberta at 310-0000 to have a Request for</li> | Award Office <li>Nomination Deadline to Alberta Student Aid:</li>   |
| ASN form mailed to you. Due to privacy issues, ASN's will not   | October 31, 2023 (fall term) and January 31, 2024 (winter term) <li>Payment: December (fall term) and March (winter term)</li> <li>Contact: Alberta Student Aid Service Centre at 1-855-606-2096</li> |
| be given over the phone.  | Visit: studentaid.alberta.ca/scholarships   |

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# Jason Lang Scholarship

# To be Submitted by the Post-Secondary Institution

Advanced Education is collecting the personal information on this form under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* (FOIP Act), as being directly related to and necessary to determine your eligibility for a scholarship under the *Student Financial Assistance Act* (Alberta) and to administer scholarships including research, statistical analysis and program evaluation. The use and disclosure of your personal information is managed in accordance with the FOIP Act.

If you have any questions about the collection, use or disclosure of this information, call the Alberta Student Aid Service Centre toll free at 1-855-606-2096 from anywhere in North America. You can also mail your questions to Alberta Student Aid, PO Box 28000 Station Main, Edmonton AB T5J 4R4.

| Personal, Citizenship and Residency Information  |   |
|--|---|
| Last Name (current legal name)   | Social Insurance Number   |
|  |   |
| First Name <i>(current legal name)</i> Middle Initial  | Day Month Year  |
|  | Birthdate   |
| Apartment or Box Number  | Alberta Student Number (mandatory)  |
|  |   |
| Street Address (add direction, e.g. S, NW, SE, if applicable)  | Citizenship Status: (check one)   |
|  | Canadian  |
| City/Town  | Permanent Resident  |
|  | Protected Person*   |
| Prov/State Country Postal/Zip Code   | *If you are a Protected Person, including Convention<br>Refugee, you must submit:   |
|  | A copy of your Social Insurance Number card AND   |
|  | <ul> <li>A copy of <b>one</b> of the following:</li> </ul>  |
| Mobile Number (format: 999-999-9999)   | - Notice of Decision, or  |
|  | <ul> <li>Verification of Status Document (VOS)</li> </ul>   |
| Telephone Number (format: 999-999-9999)  | The documentation must be valid on your Program of Study Start Date.  |
|  | Alberta Residency:  |
| Gender: 🔲 Male 🔲 Female  | Did you or one of your parents or legal guardian live in Alberta  |
| X Choose X if you do not identify as male or female, or choose to self-identify as X.  | for at least 12 consecutive months immediately prior to<br>commencing post-secondary studies? (Do not include time<br>attending post-secondary studies or vacations.) |
| Previous Last Name (if applicable)   |   |
|  | If no, was your spouse/partner an<br>Alberta resident immediately prior to you  |
| Email Address (mandatory)  | commencing post-secondary studies?  |
|  | Yes No  |
| Indigenous Status: 🔲 Status Indian/First Nations   |   |
| Non-Status Indian/First Nations  |   |
| Métis 🔲 Inuit 🗌 Not applicable   |   |
| Providing personal information on Indigenous students will help<br>measure the effectiveness of student financial assistance programs<br>in relation to Indigenous students and to research programs and<br>services to improve student success rates. If you wish to declare<br>your Indigenous heritage, please check the box that applies to you.<br><b>NOTE: This is mandatory for awards which require Indigenous</b> |   |

status as part of the eligibility, voluntary otherwise.



Student Aid

| Post-Secondary Institution Enrolment Information   |                                       |
|--|---------------------------------------|
| Post-Secondary Institution Name  | Student ID                            |
|  |                                       |
| Address  |                                       |
|  |                                       |
| City/Town Prov/State   |                                       |
|  |                                       |
| Country Postal/Zip Code  |                                       |
|  |                                       |
| Program of Study   |                                       |
|  |                                       |
| Program of Study Start Date Anticipated Date of Completion   |                                       |
| Month Year Month Year  |                                       |
|  |                                       |
| Program Length Year of Program   |                                       |
| Years Months   |                                       |
| Level of Study: (check one)  |                                       |
|  |                                       |
| Professional Program (e.g. medicine, veterinary medicine, optometry, etc.)   |                                       |
| Expected Credential (e.g. upgrading, transfer, degree, diploma, certificate, other)  |                                       |
| Expected Oredential (e.g. upgrading, transier, degree, diploma, certificate, other)  | Alberta Student Number (mandatory)    |
|  | Alberta Student Number (mandatory)    |
|  |                                       |
| Information for Previous Academic Year   |                                       |
|  | Alberta Student Number (mandatory)    |
| Information for Previous Academic Year         Post-Secondary Institution Name   | Program of Study                      |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length       |
| Information for Previous Academic Year         Post-Secondary Institution Name   | Program of Study Program Length Years |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length       |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |
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| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |
| Information for Previous Academic Year         Post-Secondary Institution Name         Image: | Program of Study Program Length Years |



Student Aid

## **Declaration of Applicant**

### I have read and understand the instructions, and declare that:

- all information provided in this application, including any supplemental information required to establish my eligibility (the "Application"), is true and complete and I understand that the information is subject to review and audit.
- I have read and understood the eligibility requirements and obligations of the scholarship and/or award as stated in the scholarship and/or award application and requirements.
- I will immediately notify Alberta Scholarships Alberta Student Aid, in writing if I withdraw from studies or of any changes to my name, address, academic status or study period, or to any other information contained in the Application in accordance with the instructions relating to changes of information found on the Alberta Student Aid website, studentaid.alberta.ca.

### **Disclosure of Information**

I understand that Advanced Education may disclose and exchange my personal information pertaining to my high school and post-secondary academic records, academic progress, and enrolment status with:

- Alberta Education to verify my Alberta Student Number, name, date of birth, and gender solely to confirm identification for the purpose of the scholarship and/or award application.
- Any of the following: provincial and federal government departments; the educational institution(s) named in the Application; boards; and any third party or third party organizations involved in the selection of the recipient.

#### I understand and agree:

- to provide all information requested by Alberta Student Aid which, in Alberta Student Aid's sole discretion, is required to verify any statements made in this Application.
- if I receive a scholarship my name, award, and city/town may be released publicly to promote the program. My name, the name of the scholarship and the scholarship amount may also be published on the Government of Alberta Grant Disclosure Portal. However, my consent to the publication of this personal information is not a criterion for eligibility, and if I do not want to be identified, I will contact Alberta Student Aid and request that it not be disclosed.

| Signature of Applicant | Today's Date |  |      |   |  |    |    | Alberta Student Number (mandatory) |  |  |  |  |  |  |  |  |  |  |
|------------------------|--------------|--|------|---|--|----|----|------------------------------------|--|--|--|--|--|--|--|--|--|--|
|                        | Day          |  | Mont | h |  | Ye | ar |                                    |  |  |  |  |  |  |  |  |  |  |
| × SIGN FIERE           |              |  |      |   |  |    |    |                                    |  |  |  |  |  |  |  |  |  |  |

Please review your application to make sure you have completed all the required fields and that the information is accurate. Incorrect or incomplete information will delay processing.

Your application and all supporting documentation must be received by the application deadline.