

This award was created to recognize an outstanding Alberta high school student and to encourage and assist students with the pursuit of post-secondary studies at a broadcast institution in Canada.

### Eligibility Criteria

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 and be residing in Alberta, 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 is an Alberta resident.
- graduate from an Alberta high school in the current academic year, and
- be enrolled full-time in the upcoming academic year, at any recognized post-secondary institution in Canada that offers degree or diploma programs in broadcasting such as TV, radio and broadcast engineering.

Students must apply in the year they graduate from high school. Students may only apply once for this award.

### Selection Process

Selection members chosen by the Tiessen Foundation will select recipients.

Applicants will be short-listed based on their Grade 12 academic average using the Alexander Rutherford Scholarship criteria. Copies of the top ten applications will be forwarded to the selection members who will review the applications and select the recipient based on the application, essay and letter of support.

### Application Process

The applicant must:

- complete an application form,
- include a maximum 750 word essay outlining their interest and pursuit in the field of broadcasting, and
- attach a letter of support from a teacher.

#### Alberta Student Number (ASN)

Your Alberta Student Number is on your Alberta Transcript for High School Achievement.

If you do not know your ASN, or do not have an ASN:

- Visit [ae.alberta.ca/ASN](http://ae.alberta.ca/ASN) for instructions.
- Call toll-free in Alberta at 310-0000 to have a Request for ASN form mailed to you. Due to privacy issues, ASN's will not be given over the phone.

#### Deadline and How to Apply

- **Application Deadline:** August 1, 2019
- **Submit application to:** Alberta Student Aid  
Alberta Student Aid  
PO Box 28000 Station Main  
Edmonton AB T5J 4R4

- **Payment:** October

Contact: Alberta Student Aid Service Centre at 1-855-606-2096  
Visit: [studentaid.alberta.ca/scholarships](http://studentaid.alberta.ca/scholarships)

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 *Alberta Heritage Scholarship Act* 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)

First Name (current legal name)

Middle Initial

Apartment or Box Number

Street Address (add direction, e.g. S, NW, SE, if applicable)

City/Town

Prov/State

Country

Postal/Zip Code

Mobile Number (format: 999-999-9999)

Telephone Number (format: 999-999-9999)

Gender:  Male  Female

Another/Prefer not to disclose

Previous Last Name (if applicable)

Email Address (mandatory)

- Indigenous Status:**  Status Indian/First Nations  
 Non-Status Indian/First Nations  
 Métis  Inuit  Not applicable

Providing personal information on Indigenous students will help measure the effectiveness of student financial assistance programs in relation to Indigenous students and to research programs and services to improve student success rates. If you wish to declare your Indigenous heritage, please check the box that applies to you.

**NOTE: This is mandatory for awards which require Indigenous status as part of the eligibility, voluntary otherwise.**

Social Insurance Number

Birthdate

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Alberta Student Number (mandatory)

**Citizenship Status: (check one)**

- Canadian  
 Permanent Resident  
 Protected Person\*  
 VISA (International Student)

**\*If you are a Protected Person, including Convention Refugee, you must submit:**

- A copy of your Social Insurance Number card **AND**
- A copy of **one** of the following:
  - Notice of Decision, or
  - Verification of Status Document (VOS)

The documentation must be valid on your Program of Study Start Date.

**Alberta Residency:**

Did you or one of your parents or legal guardian live in Alberta for at least 12 consecutive months immediately prior to commencing post-secondary studies? (Do not include time attending post-secondary studies or vacations.)

Yes  No

**If no,** were you married to an Alberta resident immediately prior to commencing post-secondary studies?

Yes  No

**If no,** submit a Scholarship Residency Résumé with your complete application (studentaid.alberta.ca/scholarships/applications-forms)

**For Office Use Only**

115	TOTAL AWD		8	8	8	DA	MO	YR	DA	MO	YR	E	AUTHORIZATION		AWARD KEY		APP KEY		
GRANT	TOTAL AWD		INSTIT		PGM		DA	MO	YR	DA	MO	YR	E	AUTHORIZATION		AWARD KEY		APP KEY	
Disbursement	MO	YR	INSTIT		PGM		DA	MO	YR	DA	MO	YR	E	AUTHORIZATION		AWARD KEY		APP KEY	

**Current 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

Month	Year

Anticipated Date of Completion

Month	Year

Program Length

  Years  Months

Year of Program

Level of Study: (check one)

- Master Level  
  Ph.D Level  
  Undergraduate  
 Professional Program (e.g. medicine, veterinary medicine, optometry, etc.)

Expected Credential (e.g. upgrading, transfer, degree, diploma, certificate, other)

**High School Information**

Name of High School (Graduating/Graduated from high school)

Graduation Date

Month	Year
	2 0 1 9

City/Town

Prov/State

Country

Postal/Zip Code

**Additional Information**

**Essay**

Include with your application, a maximum 750 word essay outlining your interest and pursuit in the field of broadcasting. It can also include any work or volunteer experience in the field of broadcasting.

**Note:** Please include a letter of support from a teacher.

**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 documents.
- 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**

<b>X SIGN HERE</b>	Day	Month	Year	

**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.**