

Canadian Society of Exploration Geophysicists Trust Fund

APPLICATION FOR SCHOLARSHIP

General requirements for eligibility

- A student must be pursuing a course of studies directed toward a career in exploration geophysics in industry, teaching or research.
- An applicant may be either an undergraduate student whose grades are above average or a graduate student
- Certain scholarships administered by the Trust Fund impose additional qualification. Completion of the questionnaire will aid in determining whether an applicant meets these qualifications.

How to apply

Complete the application form and mail it promptly to

Scholarship Committee
Canadian Society of Exploration Geophysicists
600, 640 – 8th Avenue SW, Calgary
Alberta T2P 1P7

Requirements for filing applications

Applications must be received by the CSEG on or before June 15th. NOTE THE NEW DEADLINE DATE.

Transcripts

Applications will not be considered unless accompanied by a list of courses currently in progress and a transcript of your post-secondary education. If you are a first year student, send your high school transcript.

References

Request two faculty members to write letters of recommendation in support of your application. A letter of reference is also desirable from a past or current employer. These letters should be mailed directly to the Committee by the respective authors.

Document format

This Word .doc contains editable forms. You can enter and save all your details using Word then print the completed document. If you have a paper copy you may fill it in by hand or obtain an electronic copy from the CSEG website at www.cseg.ca. Look for scholarships in the Student section.

CSEG SCHOLARSHIP APPLICATION

Please TYPE or PRINT in ink all information on the form. If additional space is required, use separate sheets and attach them to the application. The completed application form, letters of recommendation and transcripts must be received by the scholarship committee on or before June 15th. Incomplete applications will not be considered.

Mail your application to the CSEG Scholarship Committee, 600, 640 - 8th Avenue SW, Calgary, AB T2P 1P7.

Please note:

1. If you have a nickname or second name that you are known as please indicate that on your application.
2. Unofficial transcripts will be accepted. Photocopies of transcripts certified as accurate by a university official will also be accepted.
3. All of the required information must be received for the application to be considered. We suggest that you submit your application well in advance of June 15th so as not to miss the deadline.
4. We will most likely contact you by email, so please ensure that you provide a valid email address that you have access to over the summer or early fall.

Name: _____
(First name) (Middle name / Initial) (Last name)

Home address: _____
(Number and street)

(City or Town) (Province and Postal Code)

(Phone number)

Mailing address: _____
(Number and street)
(if different from above) _____
(City or Town) (Province and Postal Code)

Summer work: _____
(Company name)
(if known) _____
(City or Town) (Province and Postal Code)

(Phone number)

Contact details for late August, early September:

(Email address – preferred method of contact)

(Phone number)

Date of birth: _____

Social Insurance Number (SIN): _____

Student I.D. number: _____

This space is reserved for committee use only.

Application

Transcript

Reference #1

Reference #2

ACADEMIC INFORMATION

University/College attended: _____

Faculty: _____

Discipline or program major: _____

Enrollment date: _____ Expected graduation date: _____

Circle your degree programme: BSc / MSc / PhD / Other (specify) _____

Give details of previous degrees or diplomas that you have completed:

(Month / Year completed)	(Diploma / BSc / MSc / PhD)	(Faculty)	(University, Location)
(Month / Year completed)	(Diploma / BSc / MSc / PhD)	(Faculty)	(University, Location)
(Month / Year completed)	(Diploma / BSc / MSc / PhD)	(Faculty)	(University, Location)

Please indicate how **many courses** you are taking / have taken in each of the following disciplines for your degree programme:

	Geophysics	Geology	Physics	Math	Other Science	Other
	Full Half	Full Half	Full Half	Full Half	Full Half	Full Half
Next year						
Undergrad (completed)						
Grad (completed)						

Name and position of two faculty members who will supply letters of recommendation

(Name) (Position / University)

(Email address)

(Name) (Position / University)

(Email address)

Name and position of past or current employer (optional):

(Name) (Position / University)

(Email address)

(Please note that it is your responsibility to ensure that they submit their letters of recommendation directly to the scholarship committee before June 15th)

FINANCIAL NEED

Report your income for the past three years:

Year	Income	Source of income (i.e. full time / part time job, scholarships, t/a, loans, etc.)

If your income is less than \$10,000 for any one year please indicate how you were supported / supported yourself.

Do you anticipate receiving scholarships from any other sources? Please indicate what other scholarships have been applied for and/or already awarded.

How has your education been financed to date?

Do you have any extenuating circumstances regarding financial need that the committee should be aware of? If so, please explain.

List your related employment history beginning with the most recent employer. Provide company name, location, dates of employment, job title, immediate supervisor and a brief description of your duties and results.

Company City/Country	Dates employed	Job Title	Supervisor	Duties and Results

GENERAL (please use the space provided)

Indicate your extra-curricular activities including class or campus offices held, club memberships and organizations, leadership roles, sports activities, hobbies etc.

Elaborate on the data presented in this application indicating how your education and experience are preparing you for a career in geophysics.

The information that I have provided in this application is correct.

Signature of applicant _____ Date _____

Please have your department head or other qualified school official read through your application and sign the following statement:

I have read this application and, to the best of my knowledge, the information provided is correct.

Name _____ Title _____

Signature of official _____ Date _____