



Indigenous
Initiatives

Local First Nations Scholarship Program Application

- **The Local First Nations Scholarship is awarded to local First Nations students based on their outstanding academic excellence, meaningful and impactful contributions toward First Nations communities.**
- **Awarded annually to current Western students who are First Nation from the local territories that are associated with the London District Chiefs Council (LDCC) whose nations have longstanding relationships with the land and place upon which Western University is geographically located.**
- **Awards are based on program and course load. Students registered full-time undergraduate, graduate, and professional programs will be awarded \$3000.00 per course for a maximum of \$15,000 in an academic year. Students registered in part-time undergraduate, and graduate programs will be awarded \$3000.00 per course for a maximum of \$9000.00 in an academic year.**

Application Requirements

1. All applicants must be from a local First Nation community associated with the London District Chiefs Council (LDCC). All applicants' names will be verified with their First Nation's band membership clerks.
2. All applicants must be registered in an undergraduate, graduate or professional program at Western at the time of application.
3. All applicants must complete an application form and submit a 2000-word essay that explains (a) who they are, (b) why they are worthy recipient of this scholarship, and (c) how they will use their education to contribute to First Nations communities.
4. All applicants must provide transcripts. Students current academic record with Western will be considered by the review committee including other transcripts uses in the admission process, dependent on their year of study. If there is a need for additional information, the review committee will contact the applicant directly.
5. All applicants must provide a name and email address for one reference, either an educational contact (teacher, faculty member) or a community representative (Elder, mentor, cultural teacher).

Application deadline is September 30th annually

Applications are to be submitted to:

Indigenous Student Centre
Western Student Services Building, 1151 Richmond Street
London, Ontario, Canada, N6A 3K7
Email: dnoah@uwo.ca

For more information about the Local First Nations Scholarship,
Please contact the Donna Noah (dnoah@uwo.ca) the Indigenous Financial
Aid Coordinator.

Local First Nations Scholarship Program: Application Guidelines and Procedures

Only a **completed** application packages will be reviewed. Use this checklist to ensure that you have submitted all the required information. A completed application package will contain the following pieces of information:

- A completed Local First Nation Scholarship Program application form including your original signature and date.
- Essay** (PDF, 2000-word limit) which includes the following:
 - Who you are?
 - Why you are a worthy recipient of this scholarship?
 - How have you and/or will you use your education to advance First Nation communities?
- Transcripts** (academic record with Western and other transcripts used in admission process, dependent on year of study)
- One reference** (i.e. academic, professor/teacher, faculty member, Elder community representative or mentor) who will complete the reference form and provide a signed reference letter **directly** to Donna Noah (dnoah@uwo.ca).
- Submit one complete application package** including this completed check-list guideline form as an email attachment to Donna Noah (dnoah@uwo.ca), Indigenous Financial Aid Coordinator by September 30th 2021.



Indigenous
Initiatives

Local First Nation Scholarship Program: Application Form

A. PERSONAL DATA

| | |
|------------|-------------------------------|
| Last Name: | First Name and Middle Initial |
|------------|-------------------------------|

| | |
|----------------|----------------|
| UWO Student #: | Email address: |
|----------------|----------------|

| | | |
|----------|----------|----------------|
| Faculty: | Program: | Year of Study: |
|----------|----------|----------------|

| | |
|-----------------|-------------------------|
| Level of Study: | Full-time or Part-time: |
|-----------------|-------------------------|

| | |
|-------------------------|---------------------------|
| Number and Street Name: | Apartment or Unit Number: |
|-------------------------|---------------------------|

| | | | |
|-----------------------------|-----------|--------------|--------------------------|
| City, Town, or Post Office: | Province: | Postal Code: | Area Code and Telephone: |
|-----------------------------|-----------|--------------|--------------------------|

| | | | | | | | | |
|--|---|---|--|---|--|--|---|---|
| <p>First Nation Membership:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; padding: 5px;"><input type="checkbox"/> Aamjiwnaang First Nation</td> <td style="width: 50%; padding: 5px;"><input type="checkbox"/> Munsee Delaware Nation</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Caldwell First Nation</td> <td style="padding: 5px;"><input type="checkbox"/> Kettle & Stoney Point First Nation</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Chippewa of the Thames First Nation</td> <td style="padding: 5px;"><input type="checkbox"/> Oneida Nation of the Thames</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Eelūnaapèewii Lahkèewiit Delaware Nation</td> <td style="padding: 5px;"><input type="checkbox"/> Bkejwanong Territory</td> </tr> </table> | <input type="checkbox"/> Aamjiwnaang First Nation | <input type="checkbox"/> Munsee Delaware Nation | <input type="checkbox"/> Caldwell First Nation | <input type="checkbox"/> Kettle & Stoney Point First Nation | <input type="checkbox"/> Chippewa of the Thames First Nation | <input type="checkbox"/> Oneida Nation of the Thames | <input type="checkbox"/> Eelūnaapèewii Lahkèewiit Delaware Nation | <input type="checkbox"/> Bkejwanong Territory |
| <input type="checkbox"/> Aamjiwnaang First Nation | <input type="checkbox"/> Munsee Delaware Nation | | | | | | | |
| <input type="checkbox"/> Caldwell First Nation | <input type="checkbox"/> Kettle & Stoney Point First Nation | | | | | | | |
| <input type="checkbox"/> Chippewa of the Thames First Nation | <input type="checkbox"/> Oneida Nation of the Thames | | | | | | | |
| <input type="checkbox"/> Eelūnaapèewii Lahkèewiit Delaware Nation | <input type="checkbox"/> Bkejwanong Territory | | | | | | | |

B. REFERENCE

| Name of Reference | Position | Institution | Email |
|-------------------|----------|-------------|-------|
| | | | |

C. DECLARATION

I hereby declare that all information given on this application is true and complete in every respect. I understand that I may be required to repay all or part of this assistance if the information is found to be inaccurate for any reason.

Signature

Date