



2023 Application for The Lloyd King Scholarship

Application Deadline Date:	Friday, September 22, 2023 at 5:00 pm EST
Awarding Body:	The Insurance Institute of Canada through The Lloyd King Scholarship
Email completed applications and support documents together to:	Insurance Institute Attention: The Lloyd King Scholarship scholarships@insuranceinstitute.ca
Contact	Tracy Bodnar (416) 362-8586 / 866-362-8585 Ext.2269 scholarships@insuranceinstitute.ca

Eligibility

The Lloyd King Scholarship annually offers financial assistance in the form of up to two (2) \$2,500 scholarships to Atlantic Canada residents pursuing full-time post-secondary studies at a university level.

Atlantic Provinces	Scholarship Amount
Initial consideration given to most deserving candidates. Among candidates of equal standing first consideration given to: <ul style="list-style-type: none">- Newfoundland & Labrador, followed by- Nova Scotia, and subsequently- New Brunswick, and- Prince Edward Island	up to 2 (two) annually at a value of \$2,500 each

Selection is based on academic excellence throughout the applicant's high school and post-secondary (if appropriate) career, financial need, contribution to school, community life and/or other meaningful pursuits, major accomplishments and a strong indication of academic promise.

To be eligible, an applicant must meet the following criteria:

- Be a resident of or currently reside, for no less than the last five years, in an Atlantic province;
- Be a Canadian Citizen or Permanent Resident
- Be employed in the property-casualty insurance industry, or is a dependent of, or is immediately related to, an individual employed within that industry
- Be a member of an Insurance Institute within Canada, or is a dependent of, or is immediately related to, such a member
- Be accepted into a recognized, full-time university degree program
- Be registered for a full course load in such university degree program
- Maintain continuous full-time studies during the academic year
- Scholarships are conditional upon recipients completing their current school year with grades consistent to prior years.

Official final transcripts and an Application for The Lloyd King Scholarship must be received between now and no later than Friday, September 22, 2023 at 5:00 pm EST at scholarships@insuranceinstitute.ca.

Terms and Conditions:

Up to two (2) scholarships of \$2,500 each will be given to students who meet the following criteria:

- Be a resident of or currently reside for no less than five years, in an Atlantic province, with initial consideration given to most deserving candidates. Among candidates of equal standing first consideration will be given to applicants from Newfoundland & Labrador, followed by those from Nova Scotia and subsequently New Brunswick and Prince Edward Island.
- Be a Canadian Citizen or Permanent Resident
- Be employed in the property-casualty insurance industry, or is a dependent of, or is immediately related to, an individual employed within that industry
- Be a member of an Insurance Institute within Canada, or is a dependent of, or is immediately related to, such a member
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Use of Income and Capital:

A. The capital is to be held by the Governors of The Insurance Institute of Canada and **The Lloyd King Scholarship** and invested in such a manner as the Governors in their sole discretion shall decide.

B. Income generated annually by the capital which is not disbursed, will be reinvested with the capital sum, in accordance with the Investment Policy of the Board of Governors.

Date

Approving Donor Signature

Date

The Insurance Institute of Canada
The Lloyd King Scholarship

STUDENT CHECK LIST:

- Official final transcripts and an Application for The Lloyd King Scholarship must be received between now and no later than Friday, September 22, 2023 at 5:00 pm EST at scholarships@insuranceinstitute.ca.
- Application completed and signed
- Proof of acceptance into university program
- Proof of enrollment in a post secondary program
- Essay attached
- Two references
- Optional Reference Form (Reference to email scholarships@insuranceinstitute.ca directly. Applicant not to forward on their behalf)

PERSONAL INFORMATION

Name:	(Surname)	(Given Names)
	<input type="checkbox"/> Ms.	
	<input type="checkbox"/> Mr.	
Date of Birth (mm/dd/yr)		Citizenship
		<input type="checkbox"/> Canadian
		<input type="checkbox"/> Permanent Resident
Home / Work Phone		Cell Phone
Email Address		
What is your preferred address?	<input type="checkbox"/> Mailing	
	<input type="checkbox"/> Permanent	
Mailing Address		Permanent Address
City and Province		City and Province
Postal Code		Postal Code
Years Residing at Mailing Address	From: _____ To: _____	Years Residing at Permanent Address
		From: _____ To: _____

OTHER INFORMATION

Name:	(Surname)	(Given Names)
<small>Of individual employed in the property-casualty insurance industry</small>	<input type="checkbox"/> Ms.	
	<input type="checkbox"/> Mr.	
Insurance Institute Membership Number <small>(of individual named above)</small>		Relationship to Applicant <small>(ie child, step child, nephew, niece, etc.)</small>

CURRENT PROGRAM OF STUDY

Academic Year Scholarship Applied for	to	
	(mm/yr)	(mm/yr)
Name of University or College:		
Degree/Diploma you wish to pursue:		
Major/Specialty:		
Year of Program Student Entering:	<input type="radio"/> 1 st year <input type="radio"/> 2 nd year <input type="radio"/> 3 rd year <input type="radio"/> 4 th year	
Are you enrolled? (Please attach proof of enrolment)	<input type="radio"/> Yes <input type="radio"/> No	

ACADEMIC BACKGROUND

Post Secondary Institutions Attended

Year	Name	City/Town & Province	Date Completed

High Schools Attended

Year	Name	City/Town & Province	Date Completed

If you did not complete high school or a post-secondary term in the current academic year, please specify employment or other activity since last enrolled

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SCHOLARSHIP & ACADEMIC AWARDS

List scholarship and academic awards received. List the most recent first.

Award		Academic Year	
School		Value (if any)	
Award		Academic Year	
School		Value (if any)	
Award		Academic Year	
School		Value (if any)	

REFERENCES

It is the applicant’s responsibility to provide two (2) references from their post-secondary school, high school and/or community.

Please provide two references from post secondary, high school, and/or community:

Name	Address	Phone	Occupation
1.			
2.			

The applicant may also have the attached Optional Reference Form completed by their references. Once completed, the forms must be emailed directly from the reference to scholarships@insuranceinstitute.ca. The applicant is not to send on their behalf.

DECLARATION

By signing this declaration, I acknowledge the following:

- I confirm that I am a resident of or currently reside for no less than five years, in an Atlantic province.
- I hereby certify that all information given on this application is true and complete in every respect.
- For the purpose of verifying this application and any scholarship, the personal information on this application may be disclosed to any educational institution and if awarded a scholarship.
- I authorize **The Lloyd King Scholarship** to release pertinent information to the donor(s) of the scholarship fund.

Signature

date

Optional Reference Form

Name of Applicant _____
Please print

Name of Reference _____
Please print

Scholarships offered by **The Lloyd King Scholarship** rely in part upon information provided those who are personally familiar with the applicant. Consideration is given to the applicant’s school and community contributions and achievements, other meaningful pursuits, integrity of character, motivation, responsibility, leadership, and future academic promise.

Please complete the information requested on this form and email it directly to scholarships@insuranceinstitute.ca. Do not forward to the applicant to send on your behalf. **Important:** The applicant is required to have all completed forms completed and received at scholarships@insuranceinstitute.ca no later than Friday, September 22, 2023 at 5:00 pm EST.

1. In what capacity, have you known the applicant? *Choose one of the following*

- | | |
|--|---------------------------------|
| <input type="radio"/> Teacher /Professor | <input type="radio"/> Counselor |
| <input type="radio"/> Employer | <input type="radio"/> Friend |
| <input type="radio"/> Other: | <input type="radio"/> |

2. How long have you known the applicant? For _____ years _____ months.

3. Please rate the applicant in the following categories:

	Outstanding	Very Good	Good	Average	Below Average	Personal Knowledge
Integrity Of Character	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Demonstrated Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Future Academic Promise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contribution To School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contribution To Community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Meaningful Pursuits*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

***Please specify**

4. Please elaborate upon the basis on which you made the evaluations in item 3. on the previous page

5. Briefly describe what you deem to be this applicant's most outstanding strengths and abilities.

6. Please add any further comments you feel may help clarify the applicant's worthiness for **The Lloyd King Scholarship**.

Reference forms must be emailed directly to scholarships@insuranceinstitute.ca. Do not forward to the applicant to send on your behalf.

Signature

Date