



**THE CORPORATION OF THE COUNTY OF WELLINGTON  
LUELLA LOGAN SCHOLARSHIP APPLICATION FORM**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**POSTAL CODE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**CANADIAN UNIVERSITY OR COLLEGE:** \_\_\_\_\_

**GRADUATION YEAR:** \_\_\_\_\_

**INDICATE BELOW WHICH COURSE, UNIVERSITY OR COMMUNITY COLLEGE & CAMPUS YOU ATTEND. INCLUDE ADDRESS AND TELEPHONE:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ATTACHMENTS:**

**IN AN ATTACHED DOCUMENT, LIST HOW YOU HAVE DEMONSTRATED LEADERSHIP AND INTEREST IN LOCAL GOVERNMENT.**

**PLEASE ATTACH A COPY OF MOST RECENT TRANSCRIPT**

In the event your application is successful, your Social Insurance Number will be used to issue a T4A

**SIN:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

Personal Information contained on this form is collected under the authority of, Municipal Act, 2001, S.O. 2001, c. 25, s. 227(c) and will be used only to ascertain eligibility for the Scholarship. Questions concerning the collection of information can be directed to the Deputy Clerk at 519.837.2600 x 2524.

Successful candidates will be required to forward their Social Insurance Number to the County of Wellington prior to the award being issued.

PLEASE RETURN COMPLETED FORM WITH AN OFFICIAL TRANSCRIPT BY **SEPTEMBER 30<sup>TH</sup>** TO:

**Nicole Cardow, Deputy Clerk  
County of Wellington  
Administration Centre  
74 Woolwich Street  
Guelph ON N1H 3T9  
519.837.2600 x 2524  
Fax: 519.837.1909  
Email: [nicoleca@wellington.ca](mailto:nicoleca@wellington.ca)**