

LETHBRIDGE CONSTRUCTION ASSOCIATION APPRENTICESHIP SCHOLARSHIP AWARDS 2024 APPLICATION FORM

Scholarships

There are twelve (12) awards of \$500 each that will be awarded for this Scholarship Period (January 1 – December 31, 2023.

Eligibility

To be considered for a scholarship, the application form must be completed and submitted, along with the Employer Recommendation form.

Applicants for a Scholarship must:

- Be employed by a member company of the Lethbridge Construction Association
- Be an Alberta resident
- Be registered as an Alberta Apprentice in a trade
- Have passed their first or subsequent period apprenticeship and industry training exam
- Have returned to work for the sponsoring Lethbridge Construction Association employer
- Attach a copy of your marks from your training institute

Applicants must also include two or three paragraphs describing themselves, including what they enjoy about their trade, why they chose a career in the trades, and how this scholarship will benefit them.

Selection

Selection of scholarship recipients is made by a committee established by the LCA Board of Directors. Recipients will be selected on the basis of their marks, employer recommendation and short description about themselves. Financial need may also be considered in selecting recipients for Scholarship.

Acceptance of Awards

Awards will be presented by early June 2024. Awards must be claimed within the same fiscal year (by December 31, 2024).

Awards are taxable income. This page does not need to be attached when submitting application.

Application Submission Checklist:

- Information Page
- Description of Self
- o Employer Recommendation Form
- Marks from most recent year of schooling

PLEASE NOTE: If any of these documents are missing your application will be considered Incomplete and will not go to the committee to be reviewed.

APPLICATION FOR THE LETHBRIDGE CONSTRUCTION ASSOCIATION 2024 APPRENTICESHIP SCHOLARSHIP

We are collecting the information in this application to determine and verify your eligibility for a Lethbridge Construction Association Apprenticeship Scholarship Award. All information will be kept confidential. If you have any questions about the collection of this information, you can contact the Executive Director of the Lethbridge Construction Association.

Please print legibly, using ink Last Name: _____ First Name: _____ Name of your trade: Apprentice/Trainee ID Number: _____ Street Address: City: ______Province: _____Postal Code: _____ Phone Number: _____ Work Number: ____ Email address (mandatory):_____ Where did you last attend technical training?______ What period or level of technical training have you completed? When did you complete your last period or level of technical training?______ Have you registered for your next period of technical training? (Circle) Yes No N/A If Yes: Class Start Date: (dd/mm/yy) Institution:

about yourself. Include what you enjoy about give reasons you feel this award would beneath	t include two or three paragraphs telling the committee ut your trade, why you chose your career in the trades and efit you. Include any financial difficulties or additional nittee to consider when assessing your application. (i.e. living hal pages if required.
I declare that the information provided my knowledge.	in this application is true and complete to the best of
Signature of Applicant	Date
Print Name	_

PLEASE COMPLETE AND SIGN THE APPRENTICE APPLICATION FORM AND SUBMIT IT BY 1:00PM on Friday, March 15, 2024 TO THE LCA OFFICE AT THE FOLLOWING ADDRESS:

Lethbridge Construction Association 1705 - 36 Street North Lethbridge, Alberta T1H 6L1 PH: 403-328-2474

Email: admin@lethconst.ca



LETHBRIDGE CONSTRUCTION ASSOCIATION APPRENTICESHIP SCHOLARSHIP AWARDS 2024 Employer Recommendation Form

Please print legibly using ink

Applicant's Name:	
Apprentice/Trainee ID Number:	Trade:
Company Name:	
Name of Person completing this form:	
Position of Person completing this form: (Circ	cle) Employer / Supervisor / Journeyman / Other
(if other please indicate):	
This apprentice has worked with our compar	ny formonths/years.
Address of Business:	
Phone:	_
Email of Employer Contact (mandatory):	
Signature of person completing form	Date

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Employer Recommendation Form

(TO BE FILLED OUT BY THE APPLICANTS' EMPLOYER)

I rate this apprentice as follows:

	Above Average	Average	Below Average
Trade/Occupation	Α	В	С
Training	Α	В	С
Co-Workers	Α	В	С
Workplace	Α	В	С
Safety	Α	В	С
Attendance	Α	В	С
Willingness to learn	Α	В	С
	Α	В	С
	Training Co-Workers Workplace Safety Attendance Willingness to learn nat qualities make this appropriate the control of	Trade/Occupation A Training A Co-Workers A Workplace A Safety A Attendance A Willingness to learn A nat qualities make this apprentice an outstand an Association Scholarship? (Your opinion of y	Trade/Occupation A B Training A B Co-Workers A B Workplace A B Safety A B Attendance A B Willingness to learn A B

This form must be returned to the applicant to be dropped off, mailed or emailed with their completed scholarship application, including marks, to the following address:

Lethbridge Construction Association

1705 - 36 Street North Lethbridge, Alberta T1H 6L1 PH: 403-328-2474

Email: admin@lethconst.ca