



2017 "RISE ABOVE" SCHOLARSHIP APPLICATION

In honour of Dr. Meris Williams, the Looking Glass Foundation awards this \$2,500 scholarship to someone who is making a difference through community service and leadership.

CONTACT INFORMATION:

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cellular: _____ Email: _____

PLANS & ACTIVITIES:

1. What post-secondary institution are you planning to attend? _____

2. What province is this institution located in? _____

3. What is your intended area of study? _____

4. Please list any extra-curricular activities you have been involved in: _____

5. Briefly, please describe your long term plans: _____

6. Briefly, please describe your financial need: _____

7. How did you hear about our Scholarship Program?

8. Have you participated in any Looking Glass programs? (**PLEASE NOTE:** this question will not be used in the selection process)

ESSAY QUESTION

Please attach a short essay (maximum of 500 words) describe how this scholarship will help you reach your academic goals, and what difference it will make to you personally.



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IMPORTANT INSTRUCTIONS

To be considered, scholarship applications **MUST**:

Include:

- Completed Application Form
- Essay (Max. 500 words)
- Letter of Recommendation
- Verification of student enrolment
- Verification of having received treatment for an eating disorder

Be received by July 4, 2017:

By Mail:

Scholarship Committee
Looking Glass
Foundation
4116 Angus Drive
Vancouver, BC
V6J 4H9

Online:

lookingglassbc.com/scholarship/apply
OR
scholarship@lookingglassbc.com

PLEASE NOTE: Scholarship recipients will be required to provide a photograph (headshot), permit the use of their name and photo for promotional purposes, and provide their SIN number (for tax purposes).