**Ken Holt Memorial Scholarship**

**Faculty of Kinesiology, Sport, and Recreation**

**Submit an electronic version of this form, along with transcripts (unofficial transcripts are acceptable)** to the Associate Dean Research ([ksradr@ualberta.ca](mailto:ksradr@ualberta.ca)) by **August 1st 2020 at 4pm**

**Personal Data**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Family Name** | | **Given Name** | | **Student ID#** |
| **ACADEMIC BACKGROUND (including ongoing post-secondary degree)** | | | | |
| **Degree** | **Department** | **Name of Discipline** | | **Month/Expected Year of Completion** |
|  |  |  | |  |
|  |  |  | |  |
| **At the time of application, are you attending university?**  **Full-Time**  **Part-Time** | | | | |
| **How many credits will you have completed towards your degree program when this award is held?** | | | | |
| **SCHOLARSHIPS AND OTHER AWARDS RECEIVED (starting with most recent)** | | | | |
| **Name of Award** | | **Where Received** | | **Period Held (mm/dd/yy)** |
| **OTHER INFORMATION** | | | | |
| I am legally entitled to work on campus. Yes  No  I am planning to be registered in the Faculty of  Kinesiology, Sport, and Recreation in the Fall Term? Yes  No | | | | |
| **Current Address** | | | **Permanent Mailing Address (if different)** | |
| **If current address is temporary, indicate leaving date** | | | **Telephone number at permanent mailing address** | |
| **Telephone number at current address** | | | **Email address** | |

The information above is collected under the authority of the Universities Act Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act (FOIPP) for the purposes of promoting the work of the Faculty of Kinesiology, Sport, and Recreation at the University of Alberta.

**Supervisor Information**

**Proposed Research Project** (to be completed by the **supervisor**)

|  |  |
| --- | --- |
| **Name and Title of Supervisor** | **Department** |
| **University of Alberta Address** | **Telephone Number** |
| **Email** |
| **Title of Research Project** | **Starting Date** |
| **Briefly describe the specific work that the student will undertake, and the benefits to the student of his/her engagement in the research. Detail how the project connects with your own research and the skills and experience the student will gain from taking part in the project. Please emphasize the contribution of the project to YOUTH SPORT (MAXIMUM 200 WORDS)** | |
| **SIGNATURE** | |
| **I hereby certify that I will be supervising this student in the proposed research and development activities during the proposed period of tenure.**               **Signature of Supervisor Name of Supervisor (please print) Date** | |

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**Application Form**

**Proposed Research Project** (to be completed by the **student**)

|  |
| --- |
| **Outline the Proposed Research Project: Include a description of the research project, clearly articulating how the project relates to YOUTH SPORT (MAXIMUM 300 WORDS)** |
| **Other Scholarly Activities (e.g., presentations, publications, previous work on research projects, and work in youth sport) (MAXIMUM 300 WORDS)** |
| **SIGNATURE** |
| **I hereby acknowledge that the information above is accurate and I agree to abide by the regulations governing this award.**    **Signature of Student Name of Student (please print) Date** |

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