Financial Aid and Awards Office

Undergraduate Award Bulletin Susan Levin-Woods Scholarship

The Susan Levin-Woods Scholarship was established through the generosity of Mrs. Susan Levin-Woods, a graduate of Concordia University.

Eligibility Requirements:

- This scholarship is open to **female Canadian citizens only**, who have demonstrated excellence in her studies.
- Applicants must be pursuing a degree in any area of study at Concordia University on a full-time or part-time basis while following a career path or bringing a family.
- Applicants must have successfully completed **at least thirty (30) credits at Concordia** towards their current degree of study (transfer credits from other institutions are excluded).
- Applications must have an Assessment GPA of at least 3.30

application-based-awards.html

Award Value: \$2,500.00

How to Apply:

Students wishing to be considered for this scholarship must submit, along with their application form:

• A personal statement (500 to 700 words) explaining why you returned to studies (whether full-time or part-time) and what your personal, professional, and academic objectives are.

To submit your application, you must submit **all** documentation securely through your Student Centre. Detailed instructions on the process can be found at the following link: https://www.concordia.ca/students/financial-support/scholarships-awards/upload-process-for-concordia-

Please send an email notification to fundingyoureducation@concordia.ca once your documents are uploaded.

Application Deadline: November 12, 2024, at 5:00 p.m.

For more information on our Application-Based Awards, visit the Financial Aid and Awards Office website: https://www.concordia.ca/students/financial-support/scholarships-awards/internal.html



Susan Levin-Woods Scholarship Application Form 2024-2025

APPLICANT'S PERSO		TION			
(Please print clearly)					
Family Name:		Give	Given Name:		
Student I.D.:					
Your Marital Status:	□ Single	□ Married	□ Divorced	□ Separated	
Number of Dependent Children	<u>/ou Have</u> :				
Their Ages:					
[Please provide a copy of chi	ld(ren)'s birth certif	icate(s)]			
Your Faculty of Study:		<u>Depa</u>	artment:		
		_			
REQUIRED CANDIDA	TE STATEMEN	<u>[</u> :			
•			•	words) explaining why you al, professional, and academic	
my name and program	will be provide and that the ir	d to the donor nformation con	(s) of the scholars tained in my Uni	ted to receive this scholarship, whip as part of the University's versity application and in the and publications.	
STUDENT SIGNATURE:	STUDENT SIGNATURE:		DATE:		