

APPLICATION FORM WANOSTS'A7 SCHOLARSHIP

PERSONAL INFORMATION		
Name:		
Mailing Address:		
Email:		
Student No.		
	EDUCATION INFORMATIO	N
Department:	Degree:	Year:
•	a: warded to graduate students from	any program at the University of
Victoria who are working on iss benefit of the community and ir the Wanosts'a7 Scholarship Con	sues of Indigenous knowledge or a cooperation with the community mmittee, which is comprised of the Sciences, Human and Social Devo	any program at the University of Indigenous languages for the clear y. Recipients will be nominated by e deans or deans' designates of the elopment, Education, and Law and
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Please return this signed form to the main office of the Department of Linguistics, Clearihue D341, by 15 September 2016, to the attention of Dr Leslie Saxon. Or you may scan and email your application to Leslie at saxon@uvic.ca. Please include "Wanosts'a7 Scholarship" in the subject line.

In 2016 the scholarship is anticipated to be \$1000.