

Devin Seguin Memorial Scholarship

Donor:

Devin Seguin Memorial Foundation

Purpose of the Scholarship:

This scholarship is in memory of Devin Seguin who passed away at 23 years old. Devin had a love for anything with a motor whether it be a motorbike, quad, snowmobile, old trucks, low-riders, 4X4s or fancy cars, he loved them all. Devin made everyone smile with his big teddy bear personality and his smile that could light up a room. He would be honoured to be able to help another person live their dream by doing what they love. This scholarship is being created to encourage students to have the best attitude and work ethic in a career they are passionate about.

Eligibility:

1. Recipient must have graduated from LCHS.
2. Recipient must be enrolled or taking training in any of the following fields:
 - Mechanical field (light duty, heavy duty, motorcycle, marine, small engine)
 - Autobody
 - Welding

Application and Selection Process:

- Applicants must submit an application form, an essay and two reference letters by May 31st.
 - The 500 word essay must describe why the student is passionate about the field they have chosen to study.
 - Preferably, the two reference letters are submitted from the welding teacher and mechanics teacher at LCHS.
- The applicant must submit the essay and application form to the following address listed below.
- Reference letters must be submitted confidentially by the teachers to the address listed below.
- The applications will be reviewed by the Devin Seguin Memorial Foundation Board of Directors. The recipient will be determined by the Board of Directors selection committee. The Board of Directors will submit the name of the recipient to the Lloydminster Comprehensive High School by September 15th.

Address:

Devin Seguin Memorial Foundation Board of Directors
Box 12761
Lloydminster, Alberta
T9V 1E9

Amount: 1 Scholarship @ \$1000



**LLOYDMINSTER PUBLIC SCHOOL DIVISION
SCHOLARSHIP APPLICATION FORM**

This form is to be completed and attached to other required information when applying for the following Scholarship by May 31st. Please submit via mail to the address listed below.

Scholarship: **Devin Seguin Memorial Scholarship**

Name of Applicant in full: _____

Address of Applicant: _____

Street/Box no.

City

Province

Postal Code

Phone Number

Date of Birth: _____

High School(s) Attended: _____

Email Address: _____

Name of Parent/Guardian: _____

Address of Parent/Guardian: _____

Name of Institution You Plan To Attend: _____

Course You Plan To Take: _____

Length of Course: _____ Degree/Diploma Sought: _____

Payment will be made upon receipt of evidence of Registration at the above named institute.

I hereby agree to notify the Scholarship Committee Chairman of changes of my educational plans that would affect my eligibility for this Scholarship and also certify that the above information is correct.

Signature of Applicant

**Mail To: Devin Seguin Memorial Foundation Board of Directors
Box 12761
Lloydminster, Alberta
T9V 1E9**