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Kevin McIntyre Educational Scholarship

APPLICATION 2025 Submission Deadline: JULY 31, 2025

The **Kevin McIntyre Educational Scholarship** is awarded annually to individuals living with a spinal cord injury or other physical disability who are entering or continuing post-secondary education. This application form is to be completed by the individual; it is recommended that applicants review the scholarship guidelines prior to application submission. Only completed applications will be reviewed by the selection committee. Scholarship disbursement pending funds allocation. Applicant must possess or be able to verify ALL of the following criteria to be considered an eligible candidate:

- An active membership to Spinal Cord Injury Saskatchewan, attainable through SCI Sask office.
 - o First year membership FREE, an annual \$40 membership fee for subsequent years.
- Canadian education institutions within or outside of Saskatchewan are both eligible.
 - Qualified education Institutions meeting Ministry of Advanced Education and Skills Development.
- Educational Institute enrollment and any relevant educational confirmation.
 - o Official transcript, degree, diploma, certificates.
- Immigration and Career Training (ICT) 6-digit number issued by Saskatchewan Ministry of Immigration and Career Training.
- Saskatchewan Residency.
 - o Saskatchewan Address, Photo ID, Health card.
 - Saskatchewan Student Loan(s).
 - CRA Canadian Revenue Agency.
- SCI Sask Staff are not eligible for this scholarship.

Preferences will be given to applicants who have involvement or plan to have involvement with Spinal Cord Injury Saskatchewan.

Financial needs may be a consideration in the selection process.

	have any questions			

Name:			
Address:		City:	Province:
Phone:	Email:		Postal Code:
Marital Status:	Single	Married / Con	nmon Law
Dependents:	No	Yes	How many?
Indigenous Status:	First Nations Non-Status	Metis Not Indigenou	Inuit

	nse answer all questions b opleted applications as ou	-	ce provided. The selec	tion committee will o	only review	
1.	Please provide your Spina		chewan membership	number:		
		p for a membership	to SCI Sask (Please co		or	
2.	Please provide your 6-dig	git Immigration and	Career Training (ICT) n	umber:		
	I would like to apply us for assistance on	•	Please contact a SCI Sa ess)	isk CSS or email		
3.	Please provide the type of post-secondary education you are seeking assistance with:					
	College	University	Career D	evelopment		
	Other (Please specify):				
4.	Where are you planning	to attend post-secor	ndary education?			
	Saskatchewan					
	Another Province(Pl	ease specify):				
5.	Please provide current educational institute enrollment and any past relevant educational confirmation by application deadline (must be submitted prior to distribution of scholarship):					
	Official transcript Other (Please specify	Degree	Diploma	Certi	ficates	
6.	Please provide verification	n of Saskatchewan	Residency: SK Student Loan(s)	CRA Certificate	of Residency	
	SK Address (Please incl. city & postal code):					
7.	Please provide your curre	ent employment sta	tus:			
	Full Time	Part Time	Self-Employ	yed Une	employed	
8.	Will you be employed du Yes	ring your time atten No	ding an educational in	stitute?		
9.	Please provide an estima	te of your personal	individual income.			
	Less than \$29,999	Between S	\$30,000 - \$49,999	Between \$50,	000 - \$74,999	
	Between \$75,000 - \$	99,999 Grea	ter than or equal to \$1	.00,000		
10.	Are you receiving any oth	ner scholarships/bur	saries funding?			
	Yes	No				
11.	Please provide any altern	ative funding source	es:			
	WCB	SGI	S.A.I.D	E.I		
	Other (Please specify)):				

12.	last two years:
13.	Please describe any connection or involvement you have with Spinal Cord Injury Saskatchewan in the past five years:
	Volunteer Client Peer Mentor Employee
	Other (Please specify):
14.	Please explain how the Kevin McIntyre Educational Scholarship will help achieve your career goal:
15.	CONSENT FOR RELEASE AND USE PHOTO, IMAGES AND WRITTEN TEXT Answer does not impact your eligibility during the selection process.
	I hereby give my consent to Spinal Cord Injury Saskatchewan Inc. to use the following:
	My name
	My image/photo
	My story
	No, I do not give my consent for Spinal Cord Injury Saskatchewan Inc. to release and use
	any of my information for the purpose of Success Story.
Sigr	nature: Date: