



THE ISABELLA OLSON SCHOLARSHIP AWARD 2024

“*RISING ABOVE*”

Assisting inspiring students in achieving their dreams.



On behalf of Isabella Olson's loved ones, and the countless lives she touched, it is the esteemed honour of the Cloverdale Rodeo Youth Initiative Foundation to present the **Isabella Olson Scholarship Award, "Rising Above."**

This scholarship was created in loving memory of an exceptional and motivating individual who demonstrated determination in overcoming obstacles. Isabella's remarkable character served as a source of strength for those who knew her. As a former national sports champion and a high-achieving student, Isabella recognized the value of hard work, persistence, and commitment. Additionally, she understood the challenges that young people face in navigating life. It is because of this understanding that Isabella aspired to pursue a career in social services, utilizing her experiences and wisdom to positively impact the lives of individuals facing similar challenges. She also expressed an interest in studying law to pursue a career as a Crown Counsel. Isabella's impact touched the hearts of many, and her memory will continue to inspire her family, friends, and others through the Isabella Olson Scholarship, known as "Rising Above."

In order to commemorate Isabella's legacy, a scholarship of \$2000 has been established to commend an exceptional grade-12 student from Lord Tweedsmuir who has displayed remarkable resilience in overcoming various challenges. These obstacles may include personal difficulties, mental health issues such as anxiety or depression, experiences with bullying, or complex family circumstances. We seek to recognize a student who possesses unwavering determination to excel academically, actively participates in school activities, engages in community service, and potentially possesses relevant work experience.

CRITERIA:

- Must be a Lord Tweedsmuir Secondary School student graduating in June.
- Must submit an official **Isabella Olson Scholarship 2024** application form along with all required attachments.
- Demonstrate how you rise above significant obstacles and / or adversity.
- Engaged in various community service organizations and/or possesses relevant employment.
- Planning to attend any accredited post-secondary/trades school within twenty-four (24) months of graduation (funds to be released only upon verification of enrollment)
- Email or drop off your **typed application** form to CRYIF – Isabella Olson Scholarship Committee

ALL APPLICANTS MUST PROVIDE THE FOLLOWING:

- Completed **online typed application** form at www.cloverdalerodeofoundation.com
- Photo of the applicant for ID purposes.
- Official **Diploma Verification Transcripts** must be included.
 - The transcript you provide should show final marks from first semester, **interim marks** from second semester, and total credits you will have upon graduation. (See Counsellor or Career Centre)
- **TWO REFERENCE LETTERS**
 - One letter must be from a principal, counsellor, or teacher in your school.
 - One letter must be from an adult (*can not be a family member*) who supervised you in an officially recognized community organization.
- ★ **Both reference letters must:**
 - *show evidence of leadership and citizenship (social responsibility)*
 - *be one page maximum*
 - *have a physical or digital signature (typed/scripted signatures are not accepted)*
 - *be on official letterhead of the organization or school (if letterhead is not available the letter must include all the letter writer's contact information and relationship to you)*

APPLICATION DEADLINE

Monday, May 27, 2024



ISABELLA OLSON SCHOLARSHIP APPLICATION 2024

PERSONAL INFORMATION

Last Name: _____ First Name _____

Address: _____ City: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Graduation Year: _____ Email: _____

PLEASE REMEMBER TO ATTACH YOUR PHOTO FOR IDENTIFICATION AND PROMOTIONAL PURPOSES ONLY

EDUCATION OVERVIEW

Current High School _____ Current Grade _____

High School Address: _____ City: _____

Postal Code: _____ Phone: _____

Counsellor Contact: _____ Email: _____

Post-Secondary Institution expected to attend: _____

Area of Study: _____ Full Time Student Part Time Student

Bachelor's Degree Diploma Certificate

PLEASE REMEMBER TO ATTACH DIPLOMA VERIFICATION TRANSCRIPT WITH APPLICATION

EXTRACURRICULAR ACTIVITIES / HOBBIES

Please list 3 – 5 of Extracurricular Activities that you participated, include dates. Please note (L) leadership roles.

Extracurricular Activity / Hobby	(L)	From Date MM/YY	From To MM/YY

EMPLOYMENT & VOLUNTEER ACTIVITIES

EMPLOYMENT

Do you currently or have you previously held a position of employment? Yes _____ No _____

If yes, how many years of employment? _____ If currently working how many hours per week? _____

Please provide a detailed list of the various roles and responsibilities you have undertaken during your employment, including any leadership positions and associated duties.

SCHOOL VOLUNTEER SERVICE

List your school volunteer service (time & energy donated for the benefit of others), which was **unpaid and not required for courses**. Only list activities done in the last three years.

- Briefly describe your involvement
- Indicate with an “L” if you were in a leadership role
- Provide the date(s) for the activity
- Include the contact’s name, email address or phone #
- Total number of hours you completed in that activity Add up your hours and put the total at the bottom of the chart
- If you have more entries than the chart provides attach another page in the exact same formatting

□

Activity	Briefly Describe Involvement (20 words max per item)	L	Dates(s)	# of Hours	Contact’s name and email address or phone number

COMMUNITY VOLUNTEER SERVICE

List your community volunteer service (time & energy donated for the benefit of others), which was **unpaid and not required for courses**. Only list activities done in the last three years.

- Briefly describe your involvement
- Indicate with an “L” if you were in a leadership role
- Provide the date(s) for the activity
- Include the contact’s name, email address or phone #
- Total number of hours you completed in that activity Add up your hours and put the total at the bottom of the chart
- If you have more entries than the chart provides attach another page in the exact same formatting

□

Activity	Briefly Describe Involvement (20 words max per item)	L	Dates(s)	# of Hours	Contact’s name and email address or phone number

APPLICATION QUESTIONS

Using one of your current or past employment, volunteer or extracurricular activities, please describe the benefits and personal rewards you have gained from your involvement.

What is your career plan? How would receiving the Isabella Olson Scholarship Award assist you in pursuing your career plan?

MULTIMEDIA PRESENTATION OR ESSAY QUESTION

In a multimedia presentation or in an essay, please describe, explain and/or highlight **“How you ‘Rise Above’ significant obstacles and/or adversity in your everyday life?”**

Multimedia Presentation:

Presentations can be submitted in a range of formats, including audio, visual, still images, animations, or other interactive platforms. We kindly request that presentations adhere to a maximum duration of 5 minutes. To complete the application process, please ensure all presentations are attached and submitted to the Cloverdale Rodeo office either by email, mail, or in person.

Essay:

The essay submission should adhere to the given word limit of 300-500 words. It should be typed and saved as a PDF file format, and subsequently attached along with this application.

CHECKLIST

- Completed **Isabella Olsen online typed application** form at www.cloverdalerodeofoundation.com
- Multimedia presentation or essay is included
- Photo of the applicant for ID purposes.
- Official **Diploma Verification Transcripts** must be included.
 - The transcript you provide should show final marks from first semester, **interim marks** from second semester, and total credits you will have upon graduation. (See Counsellor or Career Centre)
- **TWO REFERENCE LETTERS**
 - One letter must be from a principal, counsellor, or teacher in your school.
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STATEMENT OF ACCURACY

I hereby confirm that all the information stated above, which has been provided to the Cloverdale Rodeo Youth Initiative Foundation, is accurate, truthful, and void of any plagiarism. Furthermore, I affirm that I have not utilized any IA or other automated tools. Additionally, I acknowledge and comprehend that the photograph I submit of myself is solely intended for identification and promotional purposes related to the Cloverdale Rodeo & Exhibition Association scholarship program.

I hereby understand that if chosen as a scholarship winner, according to the Cloverdale Rodeo Youth Initiative Foundation's scholarship policy, I must provide evidence of enrollment/registration of the post-secondary institution of my choice before scholarship funds can be released.

Scholarship Applicant's Authorized Signature

Date: _____

**** Incomplete applications and/or illegible applications will not be considered.***

ISABELLA OLSON SCHOLARSHIP APPLICATION DEADLINE is Monday, May 27, 2024.

SEND COMPLETED APPLICATION FORM BY EMAIL OR MAIL TO:

**CLOVERDALE RODEO YOUTH INITIATIVE FOUNDATION
ISABELLA OLSON SCHOLARSHIP COMMITTEE**

6060 – 176th Street
Surrey, BC V3S 4E7
Fax: 604-576-0216

Email: info@cloverdalerodeofoundation.com

For more information visit us on the web:
www.cloverdalerodeofoundation.com

*Cloverdale Rodeo & Exhibition Association is dedicated to maintaining the highest standards of confidentiality with respect to all applicants' personal information provided to us. We are committed to ensuring that our handling of personal information is in compliance with applicable privacy legislation including the Personal Information Protection and Electronic Documents Act. All applications and essays will become property of the Cloverdale Rodeo & Exhibition Association. *Incomplete applications and/or illegible applications will not be considered.*