School of Kinesiology and Health Studies

CCUPEKA LEADERSHIP AWARD

(The Canadian Council of University Physical Education

 and Kinesiology Administrators)

Application Form

Description: Awarded annually to a graduating KINE student in the School of Kinesiology and Health Studies who best demonstrates leadership, academic success, and commitment to the professions of Kinesiology and Physical Education. The student will have made significant contributions in leadership as evidenced by the student’s participation in any activities related to their degree during their undergraduate studies.

Eligibility: A graduating full-time student in KINE. Minimum GPA of 3.0 (overall B cumulative average).

|  |
| --- |
| NAME OF APPLICANT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Yr in Program:\_\_\_\_\_\_\_\_\_\_ |

##

## TO BE COMPLETED BY APPLICANT

**Brief biography (100 words) to share with CCUPEKA for website posting (if successful).**

Please describe how you demonstrate the following qualities. Please provide SPECIFIC examples for the benefit of the Selection Committee.

***LEADERSHIP PROFILE: Community Contributions***

Please comment on your contributions to the Community as they relate to the award criteria:

**(Max 100 words per activity description)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time Period and Hours Completed (e.g., hours per week or total hours)** | **Group** | **Activities/Responsibilities** | **Please indicate whether this activity is Volunteer, Paid Work or for Course Credit** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

***LEADERSHIP PROFILE: University Contributions***

Please comment on your contributions to the University as they relate to the award criteria:

**(Max 100 words per activity description)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time Period and Hours Completed (e.g., hours per week or total hours)** | **GROUP** | **ACTIVITIES/RESPONSIBILITIES** | **Please indicate whether this activity is Volunteer, Paid Work or for Course Credit** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

Why are you deserving of this award? What sets you apart from others? **Max 150 words**

Other relevant comments (e.g., please provide any relevant context for assessing your level of volunteer contributions based on other time commitments): **Max 100 words**

**VERIFIER:** Please provide the contact information of someone who can verify the information on this form.

1. Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year in program:\_\_\_\_\_\_\_

Kingston Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kingston Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Queen’s email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­

**Deadline is Friday, March 1st at 4:30 pm**

Please submit the following to skhs.ugassist@queensu.ca

1. Application form
2. Current resume
3. A recent headshot photograph including full name and student number
4. Applications must be completed electronically (no hard copies or handwritten forms will be accepted).
5. I give my consent to post my name and photo on Social Media \_\_\_\_Yes \_\_\_\_No