



LIFESAVING SOCIETY
SOCIÉTÉ DE SAUVETAGE

*The Lifeguarding Experts
Les experts en surveillance aquatique*

LIFESAVING SOCIETY – NOVA SCOTIA BRANCH

SCHOLARSHIP APPLICATION

GENERAL INFORMATION

Name: _____

Address: _____

Telephone: (Home) _____ (Work) _____

Email address: _____

Gender: Male Female Date of Birth: _____

EDUCATIONAL BACKGROUND

Name of institution attending in 2015/2016 school year: _____

Institution Name and Address: _____

Field of Study: _____

Degree/Diploma/Certificate to be obtained: _____

Year of studies in 2015/2016 school year: Year _____ of _____ Total Years.

* Please submit confirmation of acceptance into the program if this is your first year of study.

* Please submit most recent transcript of marks with this application. If you are entering your first year of study, please submit your Grade 12 marks.

REFERENCES

Please list the name and telephone numbers of two references, one personal and one academic, who are not family members and who may be contacted by the Lifesaving Society concerning your application.

1. Name: _____ Occupation: _____
Telephone No.: _____ Relationship to you: _____
How long have you known this person? _____

2. Name: _____ Occupation: _____
Telephone No.: _____ Relationship to you: _____
How long have you known this person? _____

FINANCIAL INFORMATION

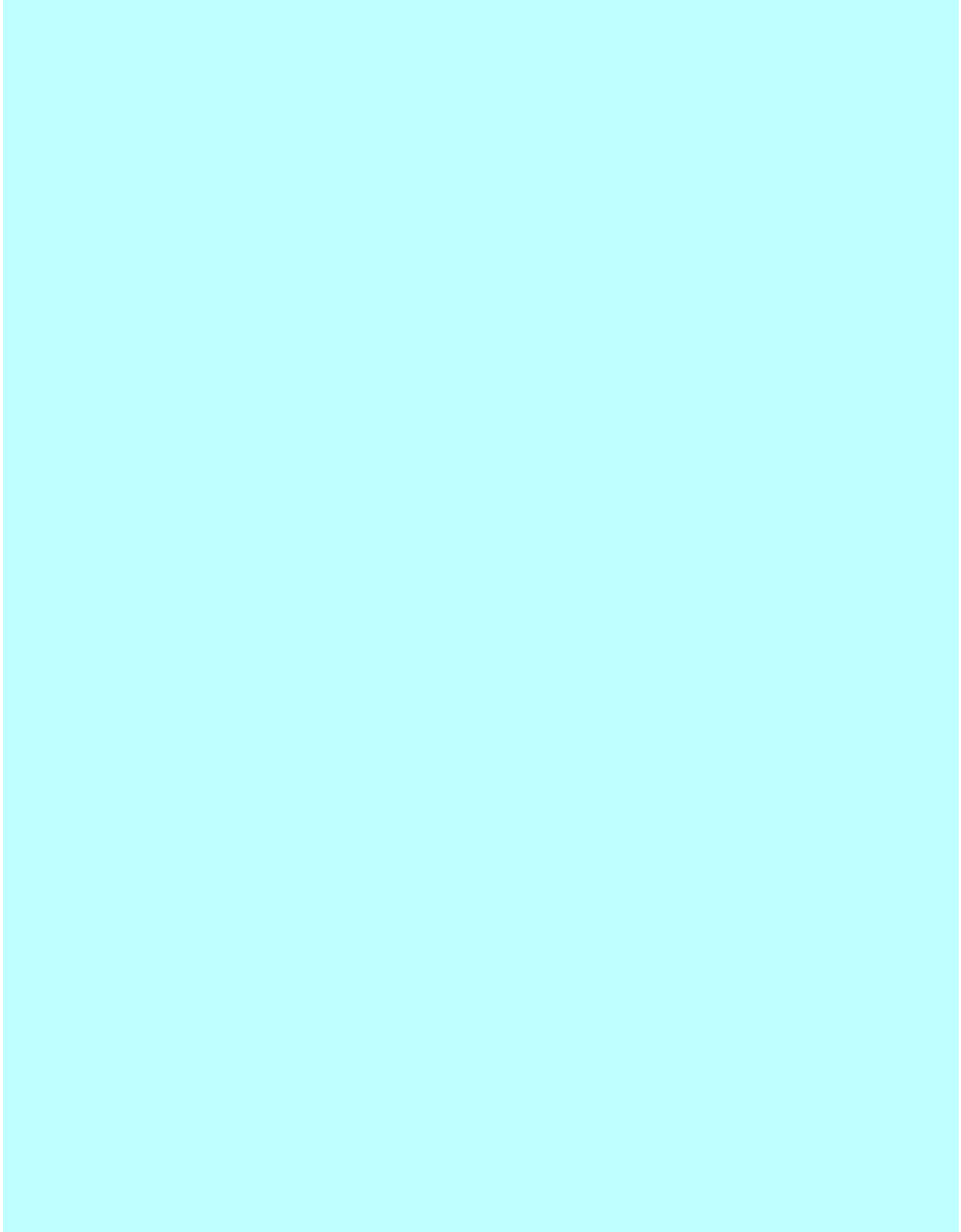
Anticipated cost of the program for the 2015-2016 academic year:

Tuition: _____ Books/Materials: _____ Living Expenses: _____
Travel Expenses: _____ Other (with details): _____

Do you have sources of funding other than your own personal resources (e.g. other scholarships and bursaries, other government loans)? If so, please list these sources and their amounts.

Sources	Amount
_____	_____

What influence do you think your experience with the Lifesaving Society will have on your intended vocation? (Please limit your answer to 200 words)



I hereby declare that the information contained in this application is true, complete and accurate.

Dated this day of , 2015.

Applicant

Have you included:

- Official transcript form the last year of study
 Notice of acceptance to your institution if this is your first year of study

Note: Application forms, official transcripts and supporting documentation become the property of the Lifesaving Society – Nova Scotia Branch and will not be returned. Please make a copy of your application package before you forward to us.

Please forward the application package to the following address:

Lifesaving Society – Nova Scotia Branch
5516 Spring Garden Road, 4th Floor
Halifax, NS B3J 1G6
Attention: Scholarship Committee