APPLICATION FORM



DISTRICT SCHOLARSHIP

PART I - TO BE COMPLETED BY THE STUDENT

Name of student	Surname	Given Names
Home Address		
Name of Parent or Guardian		Home Phone No.
Date of birth		Social Insurance No.
School		Anticipated graduation date
COURSES (WITH COURS IN YOUR GRADE 11 F		
COURSES (WITH COURS IN YOUR GRADE 12 F	PROGRAM	
SUBJECT OR SUBJE SPECIAL INTER		
REFERENCES - LIST AT THE COMMUNITY)	LEAST TWO, MOR	E IF YOU WISH (FROM WITHIN YOUR SCHOOL OR
	NAME	ADDRESS
(a)		
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DISTRICT SCHOLARSHIP

APPLICATION FORM

1.	COMMENTS OR INFORMATION WHICH WOULD BE OF SPECIAL INTEREST TO THE DISTRICT'S SCHOLARSHIP COMMITTEE. (Attach a separate sheet if more space is needed.)						
2.	DESCRIBE YOUR PRESENTATION (topic, format, equipment used).						
3.	STATEMENT REGARDING YOUR FUTURE EDUCATION AMBITIONS (Verify that your planned post secondary institution is a Designated School www.aved.gov.bc.ca/studentaidbc/welcome.htm):						
4.	STATEMENT REGARDING YOUR CAREER AMBITIONS:						
•							

The information collected on this form will be protected under the *Freedom of Information and Protection of Privacy Act. Questions about the collection and use of this information should be directed to the Information and Privacy Coordinator of School District No.* 46.

DECLARATIO	ON: I	leclare that the above	ve information is, to	the best of my know	edge and belief, correct.		
Date:			_ Signature of Appl	Signature of Applicant:			
	TO BE	C A NUMB		DL PRINCIPAL O	N BEHALF OF THE		
	This is to certify that						
a student in good standing in					School, has met the		
basic Eligibility Requirements as outlined under the Criteria for Selection.							
Grade 12 Record of Ma	arks	Subject	Letter grade		Letter Grade		
	_						
	_						
	_						
Date:			Signature				

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