***PERSONAL INFORMATION***

Applicants Name:

Birth Date:

***Earle Trevail Memorial Silver Stick Committee***

***Scholarship Fund***

November 13, 2022 Issued. ~ 07.30.02 ***FAMILY INFORMATION***

**Parent/Guardian Name:**

**Parent/Guardian Name:**

Address:

Street Number and Name

City/Town

Province Postal Code

If you are the successful candidate is parental permission given to have a picture published and printed in the Earle Trevail Memorial Silver Stick program.

**Yes No Parent/Guardian Signature:**

Telephone: E-mail: ***HOCKEY INFORMATION***

Current Hockey Team:

***EDUCATIONAL INFORMATION***

**Current Secondary Educational Institution:**

Name

Grade Level: Anticipated Graduation Date:

Extracurricular School Activities:

Community Involvement:

**Planned Post-Secondary Education/Apprenticeship:**

School/Program: Enrollment Date: School/Program: Enrollment Date: School/Program: Enrollment Date:

***PLEASE PROVIDE THE FOLLOWING ADDITONAL INFORMATION***

⮚ A recent (last 12 months) photo of yourself.

⮚ A copy of your *most recent* grades Graduation Summary/transcript. (Does not need to be an official transcript)

⮚ An essay (1-2 pages) telling us about your hobbies, interests, volunteer work, community involvement and jobs that you have had. As well, tell us why you feel you should receive this scholarship.

⮚ Brief letters of recommendation from any or all:

▪ School official (Guidance Counselor or Teacher/Coach)

▪ Hockey Coach

▪ Employer (if applicable)

⮚ Feel free to include any additional information that you would like the committee to consider when evaluating your application.

⮚ Only complete applications received on or before 2:30 pm on November 30th will be considered.

**EMAIL OR HAND DELIVER COMPLETED APPLICATION WITH ALL REQUESTED DOCUMENTS TO:**

**PETROLIA SILVER STICK SCHOLARSHIP COMMITTEE**

**Mr. Scott Watson – Scholarship Chair**

**LCCVI**

**4141 Dufferin Ave**

**Petrolia, ON N0N1R0**

**scott.watson@lkdsb.net**

| **APPLICATIONS MUST BE RECEIVED NO LATER THAN NOVEMBER 30th OF THE YEAR OF APPLICATION** |
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