

**SD70 PACIFIC RIM – ADSS LOCAL SCHOLARSHIPS & BURSARY APPLICATION FORM 2025****NAME OF SCHOLARSHIP**

**In your own words please state how you qualify for this scholarship/bursary - BE SPECIFIC. Please note: This will not be the same question for all scholarships/bursaries.**

**APPLICANT NAME:****HOME ADDRESS:****PHONE #:****MAILING ADDRESS:** *(if different from above)***POSTAL CODE:****SCHOOL ATTENDING:** *(ADSS, EALC, USS)***BIRTHDATE:****YEAR****MONTH****DAY****NAME OF PARENT/GUARDIAN:****OCCUPATION:****HOME ADDRESS:** *(if different from applicant)***EMPLOYER'S ADDRESS:****NAME OF PARENT/GUARDIAN:****OCCUPATION:****HOME ADDRESS:** *(if different from applicant)***EMPLOYER'S ADDRESS:****SIBLING'S NAME(S)/OTHER DEPENDANTS:****NAME****AGE****OCCUPATION/SCHOOL****What have you done for the last two summers? If employed, give occupation and name of employer:**

Do you have a job for this summer? If yes, where?	
What are your post-secondary plans? Please state the institution you plan to attend and the program you will take there.	
Who will be contributing to your financial support? Explain, and indicate extent of any assistance.	
List any extra-curricular activities you have been involved in:	
List any awards you have won:	
Have you been involved with any community activities not related to school? Give details.	
Give three references: <i>(not related to you)</i>	
NAME	PHONE NUMBER
1.	
2.	
3.	
YOU MUST ATTACH <b>PERSONAL LETTER</b> , A PHOTOCOPY OF YOUR <b>TRANSCRIPT</b> , YOUR 2 <sup>ND</sup> SEMESTER <b>MARKS COLLECTION FORM</b> AND YOUR <b>RESUME</b> TO THIS APPLICATION FORM.	