

Scholarship Applicant Information Sheet

MacPhee Centre For Creative Learning

Applicant Information

Legal Name*:

Last

First

M.I.

Date of Birth:

Preferred Name:

Address:

Street address

Apt/Unit #

Phone:

Email:

City

Province

Postal Code

Scholarship Applying For:

(Don Pether Emera Future Leader Award The, Karn Nicols Passion and Purpose Award, The Jack Fisher Memorial Scholarship).

*Your legal name is the name on your I.D. or birth certificate. If you are the successful applicant, we will issue a cheque payable to this name.

Education

High School:

School Address:

Attended From:

To:

Did you graduate?

Yes No

Graduation Date:

Post-Secondary Institution:

Prospective Start Date:

Enrollment Status:

Full-time Part-time

Turn Page Over...

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Karn Nicols Passion and Purpose Award Acknowledgement

Initial below to I acknowledge that if successful in receiving the Karn Nichols Passion and Purpose Award, I am given the opportunity to participate in a mentorship conversation, building a relationship with Karn in exploring career and education opportunities.

Initial: _____ Date: _____