Scholarship Applicant Information Sheet

MacPhee Centre For Creative Learning

Applicant Information

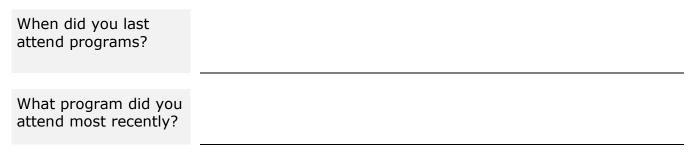
Legal Name*:	Ləst		First		M.I.	Date of Birth:	
Preferred Name:							
Address:						Phone:	
		Street address			Apt/Unit #		
						Email:	
		City		Province	Postal Code		
Scholarship Applying Fo							

(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.

Participant Information

Applicants should have previously attended one or more MacPhee Centre program; ideally in the last two years.



Education

High School:		School Address:			
Attended From:	То:	Did you graduate?	Yes No □ □	Graduation Date:	
Post- Secondary Institution:					
Prospective Start Date:		Enrollment Status:	Full-time Part-	time	

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: