

Scholarship Application Information Sheet

MacPhee Centre For Creative Learning

Applicant Information

Legal
Name*:

First Last

Date
of
Birth:

Preferred
Name:

Address:

Street address Apt/Unit #

Phone:

Email:

City Province Postal Code

Scholarship
Applying For:

- Karn Nichols Passion and Purpose Award
 Jack Fisher Memorial Scholarship
 Both (Just send one application, we will use for both awards)

*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 will have previously attended one or more MacPhee Centre program.

When did you last
attend programs?

What program did you
attend most recently?

Turn Page Over...

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

Disclaimer and signature

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

Signature: _____ Date: _____

Karn Nichols 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: _____