## Pieters-Horstman scholarship

# application

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| (Please Print) | | | | | | | | | | | | | | | | | | |
| student INFORMATION | | | | | | | | | | | | | | | | | | |
| Student last name: | | | | | | First: | | | | | Middle: | PEN Number: | | | | | Date of birth:  \_\_\_/\_\_\_\_/\_\_\_\_\_  DD/ MM/ YR | |
|  | | | | | | | | | | | |  | |
| Current Secondary School: | | Graduation date: | | | | | | | I plan on studying at the following institution:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Program | | | | | I have a conditional offer:  ❑ Yes  ❑ No | | | | |
|  | | | | | | | | | | | | | | | | | | |
| financial INFORMATION | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Pre study earnings - How much do you expect to earn (gross) during the summer months of July and August? | | | | | | | | | | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
|  | | | | | | | | | | | | | | |  | | | |
| Do you own your own car? | | | ❑ Yes | | ❑ No | | | Year: \_\_\_\_\_\_\_\_ Make:\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |  | | | |
| Do you have funding for your education? (investments, RESP’s etc) | | | | ❑ Yes | | | ❑ No | | |  | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  | | | | | | | | | | | | | | | | | | |
| guardian/parental information | | | | | | | | | | | | | | | | | | |
| Guardian/Parent 1 Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ estimated annual income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Guardian /Parent 2 Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ estimated annual income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Voluntary Guardian/Parent contribution to your post-secondary education each year $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | |
| Number of siblings attending a post-secondary institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | |  |  | | | |  |
|  | Patient/Guardian signature | | | | | | | | | | | |  | Date | | | |  |
|  |  | | | | | | | | | | | | | | | | |  |

Student budget for first year post- secondary

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Estimated **expenses** for study period | Amount |  | Estimated **resources** for study period | Amount |
| Tuition & Student fees | $ |  | Money saved for this school year | $ |
| Books & Supplies | $ |  | Anticipated part-time income during school year | $ |
| Rent/Residence fees | $ |  | Other financial awards | $ |
| Groceries | $ |  | Financial assistance from parents | $ |
| Transportation costs | $ |  | Federal/Provincial loans or grants | $ |
| Other (please specify) | $ |  | Other (please specify) | $ |
| TOTAL | $ |  | TOTAL | $ |

Please provide any further information you think would assist the Scholarship Awards Committee in its decision regarding your suitability for this Scholarship:-

How would receiving this scholarship support you as your pursue your post-secondary education?

If you would like to elaborate on any points, provide a personal comment or further information, please do so here:

Nominee declaration: I understand the information provided on this application will determine by eligibility for financial, need-based assistance. If awarded, I authorize the release of the following information to the award trustee(s) if requested: name, year, program, and information relevant to the special award requirements and background from this application

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee signature Date