

PEMBROKE REGIONAL SILVER STICK SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

Applicant's Name : _____

Birthplace : _____

Birthdate : _____

Citizenship : Canadian ☐

US ☐

Address : _____

Telephone : (____) ____ - ____ Email : _____

HOCKEY INFORMATION

Current Hockey Team : _____

The year you participated in the Pembroke Regional Silver Stick : _____

EDUCATIONAL INFORMATION

Current Secondary Educational Institution :

School Name : _____

Grade level : _____ Anticipated Graduation Date : _____

Extracurricular School Activities: _____

Planned Post Secondary Educational Institution :

School Name : _____

College ☐

University ☐

Enrollment Date: _____

Please enclose a copy of letter of acceptance and proof of enrollment.

FAMILY INFORMATION

Father's Name : _____

Occupation : _____

Mother's Name : _____

Occupation : _____

Name & Ages of Siblings living at home : _____

PLEASE PROVIDE THE FOLLOWING ADDITIONAL INFORMATION

- ➡ In your own handwriting tell us about your hobbies, interests, jobs you have had.
- ➡ Why you feel you should receive this scholarship
- ➡ A copy of your most recent grades transcript.
- ➡ Brief letters of recommendation from
 - School Counselor or teacher
 - Hockey Coach
- ➡ Feel free to include any additional information that you would like the Committee to consider when evaluating your application.

MAIL COMPLETED APPLICATION WITH ALL REQUESTED DOCUMENTS TO

Pembroke Regional Silver Stick
Attn: Tournament Chairman
P.O. Box 845
Pembroke, ON
K8A 7M5

APPLICATIONS MUST BE RECEIVED NO LATER THAN

MARCH 31ST