PRESTON HIGH SCHOOL

BURSARIES/SCHOLARSHIPS GENERAL APPLICATION

Name: _____ **Homeroom:** _____

Address: _____

Apt. # / House # Street Telephone Number

_____

City Province Postal Code

At the end of the current school year, I will have completed my OSSD. Yes ❒ No ❒

PLANS FOR NEXT YEAR

I am applying to university/college. Yes ❒ No ❒

If yes, list the university/college and program:

University/College	Program

DEADLINE: Return your application in the envelope provided, **sealed** to the Guidance Office by **Wednesday, April 24, 2019**

Do not attach other sheets to this application.

PART -TIME EMPLOYMENT

Year	Employer	Job Description

ACADEMIC COMPETITIONS

Year	Competition	Year	Competition

AWARDS

Year	Award	Year	Award

COMMUNITY ACTIVITIES

Year	Activity	Year	Activity

RESUME of HIGH SCHOOL ACTIVITIES

TEAMS

Year	Team	Year	Team
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CLUBS

Year	Club	Year	Club
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SCHOOL LETTERS

Honour Letter **NO** ❒ **YES** ❒ _____ **Year**

Senior Letter **NO** ❒ **YES** ❒ _____ **Year**

Fill in this section if you wish to be considered for bursaries/scholarships where volunteer work/community service is a criterion.

Volunteer Work at PHS
(Please **DO NOT** include activities used to meet the Community Service diploma requirement.)

_____

_____

_____

_____

_____

Volunteer Work/Community Service
(Please **DO NOT** include activities used to meet the Community Service diploma requirement.)

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Note: This section must be accurately filled in to be considered for bursaries/scholarships where financial need is a criterion.

FINANCIAL

Two parent family ❒ One parent family ❒ Independent applicant ❒

_____	_____	_____
(Name of Father)	(Occupation)	(Name of Employer)
_____	_____	_____
(Name of Mother)	(Occupation)	(Name of Employer)

Total combined income of parents for the previous year (all sources): $_____

Number of dependents residing at home (excluding applicant): _____

Number of dependents presently attending a post-secondary school: _____

Applicant's total assets (bonds, cash, bank account, etc.): $_____

Do you intend to apply for O.S.A.P.? Yes ❒ No ❒

List any other financial awards for which you have applied or intend to apply.

_____

_____

We, the undersigned, hereby declare that, to the best of our knowledge, the information given in this application is true in all respects.

_____	_____	_____
Date	Signature of Applicant	Signature of Parent/Guardian