

A. Brian Simmons Scholarship

Established in 2002 by Mr. Simmons' colleagues in recognition of his outstanding thirty-seven year commitment to the education of students in School District No. 79.

Application Form

Please type or print all information except signature.

ELIGIBILITY

Last Name		Other (in order)	
Permanent Residence Address		City, Province	Postal Code
Mailing Address (if different from above)		City, Province	Postal Code
(250) Home Telephone	(250) Cell Telephone	E-Mail Address (if available)	
Date of Birth ____ / ____ / ____ Year Month Day		Date of Graduation ____ / ____ Month Year	
School	Principal	(250) Telephone	

Check the box to the left to indicate that the following documents are attached to this application form.

☐ signed declaration form, specific to this scholarship, available from a school counselling office, indicating the years and schools attended

☐ photocopy of proof of Canadian citizenship or landed immigrant status

CONDITIONS

Preferred Canadian University	First Year Program	Entry Date (Year)
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Check the box to the left to indicate that the following documents are attached to this application form.

☐ brief, typewritten, laser printed letter indicating your future educational and occupational goals

Career Goal _____

QUALIFICATIONS

Check the box to the left to indicate that the following documents are attached to this application form.

☐ current, certified, full transcript of marks indicating: marks from the previous year of study, marks for courses completed to date in the present school years, and interim marks for courses in progress

For details of the following, see a copy of your school's Scholarship & Bursary Manual.

Qualifying Leadership Activity	Position	Teacher or Sponsor
Qualifying Other Service Activity	Position	Teacher or Sponsor
Qualifying Athletic or Fine Art Activity	Position	Coach, Teacher or Sponsor
Qualifying "Other Regarding" Community Service Activity	Position	Agency or Organization Officer
Qualifying Part-Time Employment	Position	Employer

Check the box to the left to indicate that the following documents are attached to this application form.

☐ letter of reference from an officer of a community agency or organization, indicating the nature and extent of the volunteer service provided

☐ letter of reference from a representative of a professional or corporate employer, indicating the nature of the work, the length of employment, the hours of work and the level of commitment to the performance expectations of the employer

☐ confidential, sealed letter of reference from the school principal or vice principal, indicating the administrator's level of support for this application

ACCEPTANCE CONDITIONS

In signing this application you are indicating that you understand that if you are the recipient of this scholarship, in order to receive the scholarship, you must:

- be accepted into and register as a full-time student in a recognized, full first-year program of a degree granting, publicly funded, Canadian university in the year the award is made
- provide a certified copy of your provincial graduation certificate
- provide the scholarship trustees with a graduation photograph (grad photo)

And that the scholarship in the amount of \$2000 will be paid to the recipient

- one half upon proof of paid registration for and attendance at the first term at a public Canadian university
- one half upon proof of paid registration for the second term

And that the scholarship trustees reserve the right to modify any of the qualification requirements within the original purpose of the scholarship.

Applicant's Signature _____ Date _____

TRUSTEE'S REVIEW

Applicants are asked not to make entries in this area.

School Attended	Grade 10 _____	Grade 11 _____	Grade 12 _____	G P A _____
Challenge of Graduation Program _____				
Trustee Recommendation _____				