

Academic Excellence Scholarship Program 2017-2018

APPLICATION FORM

Applicant's Personal Information	
Full Name:	
Address:	
Home Phone Number:	
Cell Phone Number:	
Email Address:	
Canadian Legal Status	

This information is collected under the authority of freedom of information and Protection of Privacy Act to determine your eligibility for the VCAC Academic Excellence Award. Please direct any question about the use of this information to scholarships@vcac.info.

Academic Information	
Post-secondary Program in which the student is/will be registered:	
Program Start Date (dd/mm/yyyy):	Expected date of completion:
Award category to which the student is applying:	A ____ B ____

Application Checklist		
Scholarship Categories	A	B
Document to prove your legal status in Canada		
VCAC reference letter (good-standing and volunteering hour confirmation scholarships@vcac.info). Inquiries on how to register to volunteer with the VCAC can be sent to info@vcac.info .		
Official transcripts		
Personal letter (750 words or less) describing both successes and challenges experienced while pursuing your education and the importance of receiving this scholarship		
Any official external proof of volunteering confirmation within Canada for the application period.		

The information which I have included in this application is accurate. Also, I authorize the VCAC and the sponsors of this program to use my name, picture or any additional information for any publicity related with the scholarship program.

Applicant's Signature: _____ Date: _____

If applicant is a minor a signature of parent or legal guardian is required:

Signature of parent or legal guardian: _____ Date: _____

Application Deadline: October 20th, 2017



Max Britos

