



CARBON AND DISTRICT AGRICULTURAL SOCIETY
AND CURLING CLUB

**STUDENT SCHOLARSHIP
APPLICATION FORM**

Name: _____ Date of Birth: _____

Address: _____ Town: _____

Postal Code: _____ E-mail: _____

Telephone: (____) _____ Cell: (____) _____ Fax: (____) _____

Graduating High School: _____ Year: _____

Time in attendance at Carbon School: From: _____ To: _____

Post Secondary Institution you will be attending: _____

Program enrolled/accepted into: _____

Length of program: _____ Start & end date of current term: _____

What year of the program are you commencing on the start date outlined above? _____

Declaration of Applicant

I have read the applicant information and have hereby made application for the Carbon and District Agricultural Society & Curling Club Scholarship, and I declare:

- That I have answered all questions applicable to me and that all information is true and complete.
- That I propose to be a full-time student at the post-secondary institution named for the period stated.
- That I authorize the Carbon and District Agricultural Society & Curling Club to request and receive information pertaining specifically to my high school academic performance and my agricultural activities that pertain to this application.
- That I authorize the Carbon and District Agricultural Society & Curling Club to review all personal information on me pertaining to this scholarship application and retain any and all of this information for a time period of one year.

Information provided with this application is confidential. The selection committee shall use the information solely for the purpose of awarding this scholarship. The decision of the selection committee is final.

Signature of Applicant: _____

Date: _____