



Emily Dahl Foundation

Post-Secondary School Scholarship

APPLICATION

PERSONAL INFORMATION

First Name
Last Name
Address
City
Province
Postal Code
Phone
Graduation School
Current Grade
Birth Date

DECLARATION: I hereby declare that I am a Canadian Citizen (or Landed Immigrant) and that statements and information provided in this application are true.

WAIVER: I understand that this information form and any attached documents may be made available to donors or scholarships for their information. I further understand that all Bursaries/Scholarships are redeemable at CANADIAN post-secondary institutions only.

Student Signature

Date

Parent/Guardian Signature

Date

Please send your completed application to the Emily Dahl Foundation
c/o Community Foundation North Okanagan email to Leanne@cfno.org

EXPERIENCES:

Please list any volunteer and employment experiences that you feel would be of help to the committee. You may also include other activities and accomplishments.

Employment:

Volunteer:

Activities:

Accomplishments:

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SUPPLEMENTARY INFORMATION:

Please explain your financial need if you feel it should be considered by the scholarship committee:

Parent/Guardian (1)

Name:

Occupation:

Number of other Dependents:

Dependent Siblings Ages (example 5, 8, 11)

Parent/Guardian (2)

Name:

Occupation:

Which Designated Post Secondary Institution are you planning to attend?

Institution:

Faculty/Program:

Have you applied?

Have you been accepted?

What are your educational aspirations? (We recognize that your educational path may change.)

What are your career goals? (We recognize that your goal may change over the next few years!)

Explain in your own words the purpose of The Emily Dahl Foundation.

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