## JOHN TAYLOR COLLEGIATE Scholarship Awards Application

Student Name	Date	
Social Insurance # (S.I.N.) Must be obtained for scholarship distribution)		

## **Information for Awards Consideration**

The information requested below is used to determine the awards given by our school and school division. **FILL OUT ALL THE REQUESTED INFORMATION**.

Note: Some awards are for specific courses at specific institutions – ex. Health Care, Sports, etc.

After graduation this year, what do you plan to do? (check)

	Yes	No	Program
U. of Manitoba			
U. of Winnipeg			
Red River College			
Please list other institution of			
choice			
Other			

Please check the activities you have participated in, currently participate in or plan to participate in, as a student at John Taylor Collegiate. Check the grade you were in when participation occurred.

J	Gr.	Gr.	Gr.	Gr.	l su were in when parti	Gr.	Gr.	Gr.	Gr.
	9	10	11	12		9	10	11	12
Art Club					GSA				
Baseball					Hockey				
Basketball					Math Contest				
Badminton					Musical				
Beach Volleyball					Peer Tutor				
Cross-country					Rugby				
Curling					Softball				
Drama Production					Soccer				
Fishing Club					Student Leadership				
Football					Track and Field				
Golf					Ultimate				
Grad Choir					Volleyball				
Grad Committee					Youth in Philanthropy				
Grad Variety Show									
Green Team					Other:				

List Positions/Involvement in Student Leadership	:
List other awards/activities that you received received	ognition from Grade 9-12.
Community Participation	
Consider sports at community clubs or other team hospital volunteer work, church work and any oth were at John Taylor Collegiate. Please list your version of the control o	ner involvement in the community, while you
CIA Hours to Date:	
**Please make sure what you write above for	CIA hours matches what is on file in the office.*
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Once completed please email your application	on to Mr. Goetz (keith.goetz@sjasd.ca)