

SCHOLARSHIP PROGRAM APPLICATION FORM

GENERAL INFORMATION FOR APPLICANTS

1. Applications should be completed with supporting documentation, in duplicate, and forwarded no later than August 31st, 2017, to the following address

ASMAC.,
P.O. Box 20065-Tower Hill
Richmond Hill, ON
L4E 0K9

Attention: ASMAC Manager, Mauricio Martinez

2. All applications received will be acknowledged by ASMAC.
3. The parent or guardian of the applicant must have been an employee of a member of ASMAC for a minimum of one year in order for the applicant to qualify.
4. The successful applicant will be advised of the scholarship award by the ASMAC President

SECTION ONE: General Information

1. Full name: _____
(Surname) (First name, or commonly used name)

2. Permanent address: _____
(Street) (Apt#)

(City) (Province) (Postal Code)

(Email) (Area Code & Telephone Number)

3. Name and address of parent or legally appointed guardian:

4. Relationship to the applicant: _____

5. Year and Month in which parent or guardian commenced employment with the ASMAC member. ***Please indicate the name of the ASMAC Member Company.***

SECTION TWO: Educational Background

1. List in chronological order the secondary schools you have attended, including the one you attended most recently:

Name of School	Address	Telephone	<u>Dates</u>		Grades Completed
			From:	To:	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

2. List any diplomas earned (i.e. night school courses, conservatory of music, etc.) if any, and name the granting educational institution

a) _____

b) _____

c) _____

3. In the space below, please provide a record of marks, grades and/or letters earned in the last **two** years of secondary school attended by the applicant. Supporting documents including the transcript of marks, letters of support, and any other material should be originals (all original documents will be returned to the applicant once the selection process is completed)

2015 Year End and General Average: _____

2016 General Average to date: _____

SECTION THREE: Additional Information

1. Briefly list clubs and organizations within the school in which the applicant participated. Please indicate dates of participation and any offices held (if more space is needed, please attach an additional sheet)

a) _____

b) _____

c) _____

2. Briefly list any involvement in community groups outside school and/or contribution to the life of the community. Please indicate dates of participation and any offices held. (if more space is needed, please attach an additional sheet)

a) _____

b) _____

c) _____

SECTION FOUR: Educational Plans

1. Name and address of university or college to which the applicant has been admitted:

2. Name of program to be studied:

3. Name of diploma or degree to be earned:

4. Commencement date of college or university program:

5. Number of years normally required to complete this degree/diploma:

6. Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals

SECTION FOUR: Financial Information

PARENTAL INFORMATION

FATHER Occupation _____

MOTHER Occupation _____

STUDENT INFORMATION

Gross Income Survey 2014 _____ **2015** _____ **Estimated 2016** _____

Other Scholarships or Bursaries awarded for 2016 _____

Value of Scholarships or Bursaries Awarded for 2016 _____

Date

Signature of Applicant