B.C.L.S.SCHOLARSHIPFUND

http://www.bclapidary.com/Scholarship.html

Application Form **Deadline: August15**

Please print:

Full Name of Applicant _____
Full given names Surname

Address _____

Town/City _____ Province _____ Postal Code _____

Birth Date _____ S.I.N. _____ e-mail _____

Phone No. _____ High School attended _____

Location _____

Official High School Transcript **from the Province of BC** of your marks **must** be included with this application

Institution to be attended _____

Location _____

Degree, Diploma or Certification sought _____

Are you _____ your parents _____ your grandparents _____ current members of a club affiliated with the B.C.L.S.?

Name of Member(s) _____

Name of Club(s) _____

Applicant's signature _____ Date _____

To be completed by the B.C.L.S. Affiliated Club

Do you verify the Club affiliation of the applicant? _____ Do you endorse this application? _____

Comments _____

_____

I hereby certify that the answers given to the eligibility of the applicant are true to the best of my knowledge.

Please print:

Club _____ Date _____

President _____

Signature _____