



**DISTRICT OF ELKFORD SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION**

First and last name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Street address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/guardian's first and last name: \_\_\_\_\_

**POST-SECONDARY INSTITUTE INFORMATION**

Name of post-secondary institute applied to: \_\_\_\_\_

Program of study: \_\_\_\_\_

Working toward (check one):      certificate \_\_\_\_\_      diploma \_\_\_\_\_      degree \_\_\_\_\_

**MANDATORY CRITERIA (CHECK TO CONFIRM THESE ARE ATTACHED TO YOUR APPLICATION)**

Proof of current residency in Elkford \_\_\_\_\_

Proof of current attendance at Elkford Secondary School \_\_\_\_\_

Proof of registration at a post-secondary institute \_\_\_\_\_

**INSTRUCTIONS**

1. Complete this application form in full.
2. Attach the required mandatory information as outlined above.
3. Submit your application and documentation to the District of Elkford **before 4:30 p.m. on May 31, 2024** to the attention of the Director of Corporate Services:
  - a. By mail to P.O. Box 774, Elkford, B.C. V0B 1H0
  - b. By email to [info@elkford.ca](mailto:info@elkford.ca)
  - c. In person at the District of Elkford Office, 744 Fording Drive, Elkford, B.C.

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_