

PLEASE PRINT CLEARLY

For Office Use:

**BLOMHA Scholarship Program
Application Form**

1. CANDIDATE'S Personal Information:

Name: _____
Surname Given Name

2. CANDIDATE'S Educational letters of Reference.

Please attach two (2) letters of reference from your current school or former high school.

3. CANDIDATE'S Educational Background

Current School/ If currently enrolled in post-secondary institution, please indicate the High School which you graduated from.

Contact at Current School: _____ () _____
Name Phone

I currently have a clear academic status Y / N

Post-Secondary Education Institution Applied For: _____

Area of Study: _____

I will not be receiving any other hockey scholarships: Y / N

VOLUNTEER'S Personal Information:

Name: _____
Surname Given Name

Current Address: _____
Street/ Box #-

City/ Town Postal Code

VOLUNTEER Involvement

Please submit one letter of approximately 250 words outlining you BLOMHA Volunteer involvement in detail.

I hereby apply for financial assistance and declare that all information submitted is complete and true in every aspect and that I have answered all questions applicable to me on this form.

Signature of Candidate Signature of Volunteer

Date Date



Since 1951

**BLOMHA
Volunteer
Scholarship Program**

**Program Details & Application
Form**

**One Scholarship of \$1000.00
To Be Awarded Annually**

*E*ligibility:

To be eligible to receive a scholarship, CANDIDATES must meet the following criteria:

1. Candidates must be the son/daughter of a BLOMHA Volunteer (see VOLUNTEER criteria below).
2. Candidates must be enrolled or in the process of enrolling in a post-secondary institution.
3. Candidates must meet the admission standards of the post-secondary institution that they are enrolling in.
4. Candidates must have maintained clear academic status. Students on probation are not eligible for a scholarship.
5. Candidates may only be eligible to receive the scholarship once.

To be eligible for this scholarship the VOLUNTEER must meet the following criteria:

1. The BLOMHA Volunteer must be the legal guardian of the candidate.
2. The BLOMHA Volunteer must be a current volunteer within BLOMHA, and have been active as a volunteer for the past three consecutive years.
3. Anyone who volunteers on a regular basis for BLOMHA will be eligible for the scholarship, with the exception of the members of the BLOMHA Board of Directors.



*H*ow to apply

1. Candidates and BLOMHA Volunteers must complete the application form included in this brochure.
2. Accompanying the application form, CANDIDATES must submit the following:
two (2) letters of reference from their current school or former high school, an official copy of their school transcript.
VOLUNTEERS must submit the following:
A letter of approximately 250 words outlining their BLOMHA volunteer involvement **in detail**.
3. All required information must be submitted by June 1 of the year in which they are applying to the following address:

BLOMHA
3455 Fairview Street
Burlington, Ontario
L7N 2R4

Facsimiles **will not** be accepted.

The successful applicant shall be announced at **the BLOMHA General Meeting in late June**. Payment of the Scholarship shall be made upon proof of enrollment. Proof of enrolment will be acceptable in the form of a receipt from the educational institution the recipient is attending. Payment will be made directly to the recipient.