Lohana Charitable Foundation

Post-Secondary Scholarship
Candidate Application Form

Section A: Personal Information		
Surname	First (Given) Name	Middle Name (if any)
Date of Birth (yy/mm/dd)	Status in Canada ☐ Canadian Citizen ☐ Permanent Resident	
Mailing Address		
City/Town	Province/Territory	Postal Code
Telephone Number	Email Address (required to confirm receipt of your application)	
High School Graduation Date (yy/mm)	☐ I will be entering my first year of full-time studies leading to a post-secondary diploma or degree at an approved post-secondary institution for the 2009-2010 academic year	
Section B: School Contact Information		
Name of Current Canadian Secondary School/CEGEP/Other academic institution		
Street Address		
City/Town	Province/Territory	Postal Code
Telephone Number	Name of School Principal	

Section C: Academic Information

List, in order of preference, the approved post-secondary institutions and programs from which you have a applied of have a letter of acceptance from.

Name of Institution	Location	Program
1)		
2)		
3)		

☐ I have attached the letter of acceptance from the approved post-secondary institution that I intend to attend for the 2009-2010 academic year. If a letter of acceptance has not been received yet, I will mail this a copy of the acceptance letter to LCF by **no later than July 3, 2009.**

Please briefly list your potential career paths below and your reason for choosing those possibilities.

Possible Career Path	Reason
1)	
2)	
3)	

Academic Average of All Grade 11/ Prior Year Courses Taken

Academic Average of All Grade 12/Final Year Courses Taken (to date)

Section D: Personal Circumstances

Are there any personal circumstances you would like to mention that may have adversely affected your grades?

☐ Yes ☐ No

If yes, please elaborate (you may attach additional pages).

Section E: Financial Information

Please outline your estimated expenses for the 2009-2010 academic year.

$ Tuition

$ Books/Instruments/Other School Supplies

$ Rent/Residence

$ Food

$ Local Transportation

$ Other (please specify)

$ TOTAL EXPENSES

How will you finance your total expenses for post-secondary education totaled above? (please check all that apply)

☐ Student Financial Assistance that will not have to be repaid

(Scholarships, Bursaries, Other)

☐ Repayable Financial Loans or Other Assistance

☐ Family/Parents

☐ Self

☐ Other (please specify)

Please include details of all student financial assistance that you will be receiving that does not have to be repaid including but not limited to scholarships, bursaries, grants etc.

Type of Assistance (scholarship, bursary, grant etc.)	Source of assistance	Amount	Frequency/When will it be paid	Conditions/Terms of Assistance

In total, how much Student Financial Assistance will you receive that does not have to be repaid?

$ In the 2009-2010 academic year

$ Overall, for your post-secondary education in total.

☐ I confirm that for the 2009/2010 academic year, the total of the scholarships monies received/will be received that do not have to be repaid do not exceed $6,000.

Section F: Supplemental Questions

In a total of 1500 words or less, respond to all of the following questions:

1. Describe one of your most meaningful contributions in your community or outside your community - how has this influenced you personally?

2. Tell us about your "next steps" - how will this scholarship benefit you?

3. Provide 2 suggestions on how the Lohana Charitable Foundation could improve?

Please complete these questions in the text space provided below.