



DRAYTON BRENNAN MEMORIAL
SCHOLARSHIP FUND APPLICATION FORM

(Please Print)

A. PERSONAL INFORMATION

1. NAME:

Surname: _____ Given Name: _____

2. MAILING ADDRESS: _____

Postal Code: _____ Phone Number: _____

Permanent Home Address: Same as above or:

Postal Code: _____ Phone Number: _____

E-mail Address: _____

3. BIRTH DATE: Year: _____ Month: _____ Day: _____

4. NAME AND LOCATION OF HIGH SCHOOL:

B. APPLICANT'S INFORMATION

*Attach a copy of your high school transcripts.

Intended Post-Secondary Institution: _____

Intended Program of Study: _____

Name of most recent hockey team played for with Peace River Minor Hockey:

C. LETTERS OF REFERENCE

Attach the two letters of reference requested in the program information.

D. INTERVIEW

All applicants selected to potentially receive the scholarship may be requested to meet with the Selection Committee. A representative from the Selection Committee will contact you to set up the interview.

Thank you for your application. Submit this application form, your written response to the question posed in the Program information, your letters of reference, and your high school transcripts on or before May 31st.

PRIVACY AND CONSENT

- The information that I provided for this application is true, accurate and complete.
- I am aware that providing incomplete or false information will be considered fraud and will affect my ability to access future funding.
- I am aware that the granting of these awards is subject to conditions listed in my acceptance letter.
- I authorize the Selection Committee to contact my references if needed.
- I authorize the Drayton Brennan Memorial Scholarship Fund to distribute this application to the Selection Committee for review.

Signature: _____ Date: _____

CONSENT FOR PUBLIC RECOGNITION OF STUDENT AWARD RECIPIENT

Signing this consent form permits the Drayton Brennan Memorial Scholarship Fund to publicly recognize the achievement of the student as a recipient of the award.

If selected for an award, consent is given to the Drayton Brennan Memorial Scholarship Fund to publish the student's name, school location with award(s) received and future post-secondary plans. This and celebrating recognition may take place at public award ceremonies or be displayed publicly in one or more ways including but not limited to newspaper and the Peace River Minor Hockey website/social media sites, for the purpose of recognizing student accomplishment(s). It is understood that not signing this consent will not prejudice the consideration of student award applications.

Applicant's Signature: _____ Date: _____

Forward completed applications to: The Drayton Brennan Memorial Scholarship Fund,
8237 – 105 Avenue, Peace River, AB T8S 1M8 or by email:
dbrennanscholarship@telus.net
APPLICATIONS MUST BE POSTMARKED NO LATER THAN MAY 31ST