**D.6.1 APPLICATION FOR DISTRICT SCHOLARSHIP & AWARD**

**Adopted:** November 1999

Please complete and return this form to your Principal by June 15th.

Surname: Given Names:

Address:

Telephone: School:

Social Insurance Number:

List all courses taken during your Grade XI and Grade XII years. Declare grades for courses completed. For courses not yet completed, submit most recent grades and indicate that they are interim.

**COURSE NAMES/NUMBERS FINAL MARK or INTERIM MARK**

**CAREER ORIENTED CONCENTRATION:**

1.

2.

3.

4.

**BEST EIGHT (8) OTHER COURSES:**

1.

2.

3.

4.

5.

6.

7.

8.  **% Average ( )**

**ADDITIONAL COURSES:**

1.

2.

3.

4.

Principal's Verification

*To give an opportunity to put forth information which you feel will help your application; submit a one page statement supporting your application. Include your immediate future plans.*