



GIRL GUIDES OF CANADA-GUIDES DU CANADA QUEBEC COUNCIL SCHOLARSHIP APPLICATION

Mail to: GGC-Quebec Council
Chair, Scholarship Selection Committee
1939 de Maisonneuve Blvd., W
Montreal, QC H3H 1K3

By: 1. Regular mail (Mail early to arrive by the first day of June).
2. Courier
3. Deliver by hand (no fax or email)

1. The completed application form must include:
 - One letter of reference from a Member of Guiding
 - One letter of reference from outside Guiding
 - Photocopy of your latest academic transcript of marks
 - Completed 'Personal Financial Plan'
2. Any additional information/documents/letters sent with your application will not be considered.
3. All applications must be received by GGC-Quebec Council on or before the first day of June.
4. The scholarship is conditional on acceptance to a full-time program at a Quebec institution of the applicant's choice. The \$1,000 scholarship will be awarded to the recipient as soon as GGC-Quebec Council has received proof that the recipient is, in fact, a full-time student attending the Quebec institution indicated on her application.

GUIDELINES: (Please print clearly or type)

Name: _____
(First name as recorded in iMIS) (Family name as recorded in iMIS) iMIS number

Address: _____
Civic # and Street (City) (Province) (Postal Code)

Telephone #: () _____
Home

Date of Birth: _____ **Email address:** _____

Educational Institution Currently Attending: _____

Proposed Quebec Institution if not currently enrolled

1. _____
2. _____
3. _____
4. _____

Program/Course: _____

Year entering: (Please circle)

CEGEP 1 2 3 **UNIVERSITY** 1 2 3 4 **TECH/VOC** 1 2 3 4 **POST-GRADUATE** 1 2 3 4 5

Present position in Guiding: Ranger ___ Lones ___ Link ___ Guider ___ Trefoil ___

Other: _____

Please give positions held and outline experience (including level of achievement)

- Sparks _____
- Brownies _____
- Guides _____
- Pathfinders _____
- Rangers _____
- Cadets _____
- Jr. Leaders _____
- Guider _____
- Link _____
- Lones _____
- Trefoil _____



Personal Financial Plan

NAME:	
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Please list below all known and expected sources of income and all expected expenses for the coming year. Income sources should include any monetary support from parents, friends and other income received.

<i>SOURCE OF INCOME</i>	<i>EXPENSES</i>
Bursary _____	Tuition _____
Scholarship _____	Books / School Supplies _____
Employment income _____	Transportation _____
Investment income _____	Rent _____
Student Loans _____	Phone _____
Other _____	Food _____
_____	Utilities _____
_____	Clothes / Personal Items _____
_____	Recreation _____
_____	Membership Fees _____
_____	Loan Payments _____
_____	Other _____
_____	_____
_____	_____

Certification Statement:

By signing this form, I certify that all the information reported to qualify for the GGC-Quebec Council Scholarship is complete and correct.

Applicant's Signature

Date