



# BCIT SCHOLARSHIP

<b>FIELD OF STUDY</b>	BCIT General Insurance and Risk Management Diploma
<b>VALUE</b>	\$1,500
<b>CONDITIONS</b>	Only applicants who are registered or intending to register in Semester 2, 3 or 4 of the General Insurance and Risk Management Diploma are eligible for this scholarship
<b>APPLY</b>	<a href="mailto:gala@salutebc.org">gala@salutebc.org</a>
<b>DONOR</b>	Salute - Insurance Person of the Year Committee
<b>DATE</b>	This application is to be completed and must be received by the application office by close of business on September 15 <sup>th</sup> of each year. The award winner will be announced at the Salute-Insurance Person of the Year banquet in the fall.

# BCIT SCHOLARSHIP APPLICATION

Please print legibly and answer all questions.  
Only completed applications with attached transcripts will be considered.

## GENERAL INFORMATION

Scholarship Applied for **BCIT General Insurance and Risk Management Diploma**

### 1. Name

\_\_\_\_\_

Last Name                      Given Names                      Mr./Mrs./Miss/Ms.

### 2. Permanent Address

\_\_\_\_\_

Apt. #                      Street Address

\_\_\_\_\_

City                      Province                      Postal Code

### 3. Phone & Email

\_\_\_\_\_

Phone                      Email

### 4. Date of Birth

\_\_\_\_\_

Day      Month      Year

### 5. Relation in Industry

\_\_\_\_\_

Name                      Occupation

\_\_\_\_\_

Name of employer

\_\_\_\_\_

Address

### 6. Dependents

Number of dependent children in your family (including yourself) \_\_\_\_\_

## ACADEMIC INFORMATION

### 7. School

Provide name and address of each school attended in the past three years

\_\_\_\_\_

Name of current school

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Address

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Name of previous school (if applicable)

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Address of previous school

## 8. Scholastic Record

*Please attach transcripts showing complete scholastic record for the past two years. **Applications will not be considered without transcripts.***

## 9. Awards

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List of honours and/or awards of scholarships you have received

## 10. References

List two names to be contacted as references\*

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Name

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Address

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Name

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Address

**\*Note:** Both references must be from academic sources familiar with your studies.

# FINANCIAL INFORMATION

## 11. Employment

Record of employment for the past two years\*

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Employer	Address	Year	Occupation
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Employer	Address	Year	Occupation
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Employer	Address	Year	Occupation
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Employer Address Year Occupation

\*Note: Include summer and part time work.

12. Assistance

Give details of any financial assistance for the coming year\*

Type Source Amount

Type Source Amount

Type Source Amount

\*Note: Include assistance you have already received or intend to apply for (e.g. student loans, scholarships, etc.)

13. Sports

All sports you have played in organized groups in the last two years

Name Position Nature of group

Name Position Nature of group

Name Position Nature of group

14. Extra Curricular

List activities fort the last two years

15. Leadership

Offices held in any clubs or groups

Club/Group Position Year

Club/Group Position Year

Club/Group Position Year

## 16. Hobbies

List hobbies to which you actively devote attention

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Hobby  
Since

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Hobby  
Since

---

Hobby  
Since

## DECLARATION OF APPLICANT

I, \_\_\_\_\_, do solemnly declare:

- (a) that to the best of my knowledge and belief, the required information supplied above is correct and complete in every respect; and
- (b) that any funds awarded on the basis of this application will be used only for the valid educational expenses associated with my post-secondary studies.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Extra pages may be used to provide additional information.**

