

# 1120 Rock Club SCHOLARSHIP FUND

## Application Form

Please print:

Full Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Town/City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

Birth Date \_\_\_\_\_ S.I.N. \_\_\_\_\_

e-mail \_\_\_\_\_

Phone No. \_\_\_\_\_

High School attended \_\_\_\_\_

Location \_\_\_\_\_

Attach:

1. official High School diploma
2. official documentation for 2015-2016 enrollment in the institution

-location \_\_\_\_\_

-Degree, Diploma or Certification sought \_\_\_\_\_

You \_\_\_\_\_ your parent \_\_\_\_\_ your grandparent \_\_\_\_\_ is a current member of 1120 Rock Club.

Name of Member(s) \_\_\_\_\_

Applicant's signature \_\_\_\_\_

Date \_\_\_\_\_

Submit to:

1120 Rock Club SCHOLARSHIP FUND

380 Wardlaw Ave

Kelowna BC

V1Y 5B3