Application Form

For

George F. Flood Memorial Scholarship

Administered by

Saint John Construction Association And CANB – Saint John

263 Germain Street

Saint John, N.B.

E2L 2G7

Phone: 633-1101

Fax: 633-1265

E-Mail: planroom@nb.aibn.com

Note: If you are enrolling as a first year student in a University or College, then you must attach a transcript of your most recent high school marks with this application. As these marks are updated, it is imperative that a copy of all revisions be submitted to the Association as they are received. Failure to do this may disqualify this application.

During University or College, a transcript of your marks, plus all the latest revisions must be submitted in the same manner as instructed above.

Transcripts and Revisions must be submitted by July 31st, each year, to be considered. A total of Five Thousand Dollars will be given.

All applications must be made on this form, which must be completed and returned by July 31st.

Submissions by fax or e-mail will be accepted, however original transcript of marks must be received prior to awards.

About yourself

Name		
	Surname	Given Names
Full mailing address		
		Postal Code
Phone Number	Date o	of Birth
About your Education		
Where did you complete your s	secondary education and	d in what year?
University or College which you	ມ plan to attend this fall	
		ate student in a program that will Degree or Certificate.
Anticipated year of Graduation		
Have you been accepted by thi	is University or College?	Yes No
Are you attending a Summer S	chool? Rea	ison?
For Post First Year Students in Institutions this year	University or College w	ho are Changing Courses or
University attended last year _		
Degree program last year		
Reason for this change		

Your Qualifications

up to \$20,000

\$20-30,000

\$30-40,000

You or one of your parents must:

- A) Belong to the Saint John Construction Association and/or CANB Saint John
- B) Be an Employee of a Member of the Saint John Construction Association and/or CANB Saint John
- C) Be a Member of Staff of the Saint John Construction Association and/or CANB Saint John

<u>Certification</u>	
I,, a signing office	r of
Certify that this applicant, or a Parent of the applicant is e	employed with our organization
Signature _	Date
Note: Financial need is one of the criteria that is taken in scholarships. To assist in the assessment process, we rejudgement. We ask that this information be provided, wit application for these Scholarships will be kept strictly con-	equire some financial data to make this h reasonable accuracy. The entire
About your Family: Father=s Name:	
Occupation:	
Employer:	_ Years employed
Mother=s Name:	
Occupation:	Full-time or Part-time
Employer:	_ Years employed
Total Family Annual Income	

\$40-50,000

\$50-60,000 Over \$60,000

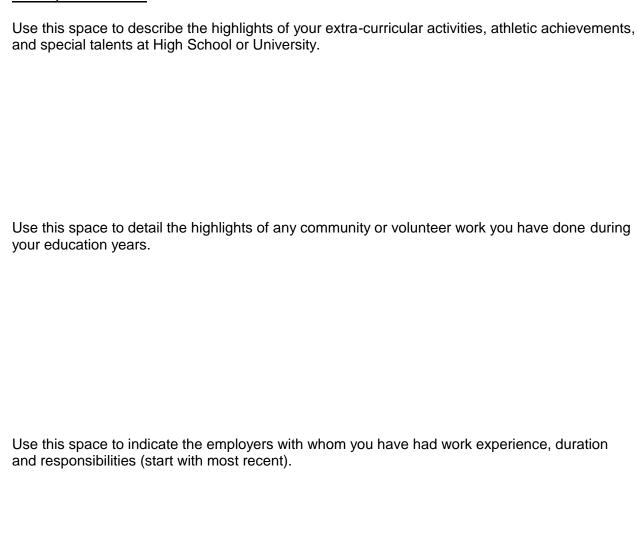
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Not including yourself, please list the dependents in your family who are attending school, college, or university and their ages:

Name:	Age:	
Name:	Age:	
Please list the year, amount, duration and Name of a been awarded in past years:	any Scholarship or Bursary tha	t you have
Are there any other financial grants or loans being meducation?	ade to you at this time to furth	er your
Yes No		
If the answer is yes, please give brief details and the	amounts of these grants or lo	ans.

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About your activities:	About	vour	activitie	s:
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Use this Space to write a Paragraph in which you describe to the Review Committee, how important winning a Scholarship Award will be to your Educational Career:
Please submit two Academic References who could attest to your capability if asked to do so by the Review Committee. Please submit names, Positions, Schools and a valid phone number for a daytime call in the Month of August of the current year.
Attach copies of all Transcripts, Letters of Reference or additional documents as attachments. Date of this ApplicationSignature of Applicant