**SCOTT BOWES MEMORIAL**

**SCHOLARSHIP APPLICATION**

A. Eligibility: A $1,000 scholarship will be awarded to a student graduating from James M. Hill Memorial High School who will be pursuing post-secondary studies.

B. Criteria: Community and School Involvement.

C. Presentation: The award will be presented by a member of the Scott Bowes family. Written confirmation from the post-secondary institution must be provided.

D. Selection of Scholarship: A committee comprising of the Scott Bowes family will review all applications. What do you know about Scott?

E. Application Deadline: May 20th of each year. Email to [valeriebowes@hotmail.com](mailto:valeriebowes@hotmail.com) with “Scott Bowes Memorial Scholarship” in the subject line

F. Copy of current High School Marks.

G. Personal Information.

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Name in Full Telephone Number

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Street City Postal Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth

Describe your Educational Objectives: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post-secondary Institution you plan to attend:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program of studies:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What other scholarships/awards have you received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If dependent on parents, number of persons dependent on parents including yourself:

Indicate where you will be living while attending college/university:

With Parent \_\_\_\_\_\_\_\_\_\_\_\_\_ Rent \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H. Community and School Volunteer Summary: Also include any athletics, other interests, work experience and any awards you may have received.