

# Jack Estey Memorial Scholarship

Submit to Main Office at JMH by May 15<sup>th</sup>/2024

**Proof of Enrollment** – Proof of enrollment is required before release of funds

To assist with post secondary education for up to four needy and/or deserving students who reside in the area of the former Village of Loggieville, NB.

Name: \_\_\_\_\_ Rank (if ranked): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

(must be former **Village of Loggieville**)

Name of Parent(s)/Guardian(s): \_\_\_\_\_

Occupation: \_\_\_\_\_

## Post Secondary Plans:

Institution: \_\_\_\_\_

Degree (if degree program): \_\_\_\_\_

Major: \_\_\_\_\_

## Scholarships or Bursaries received:

**Name**

**Amount**

\_\_\_\_\_

How do you plan to finance your education: \_\_\_\_\_

\_\_\_\_\_

Please give a brief statement of your financial need: \_\_\_\_\_

\_\_\_\_\_

Major activities: \_\_\_\_\_

\_\_\_\_\_

Community/Volunteer Work: \_\_\_\_\_

\_\_\_\_\_

**Note:** ***Proof of Acceptance** – official letter/copy from a post-secondary institute.*

***Proof of Enrollment** – official letter/copy indicating registered and attending from a post-secondary institute.*