

**ALKALI RESOURCE MANAGEMENT LTD.**

**SCHOLARSHIP APPLICATION FORM**



## INSTRUCTIONS

1. Read carefully before completing, signing or submitting this form.
2. Ensure that this form is completed in full.
3. Complete in BLOCK LETTERS.

### Criteria:

4. Ensure that this form is duly signed.
5. Application forms with incomplete information will be disqualified.
6. Application forms with incorrect information will lead to your application being disqualified.

### Ensure that you meet the following:

7. Attach **ALL** of the following documents **REQUIRED**:
  - a. Certified copy of a valid high school diploma (if you have completed Grade 12).
  - b. Letter of acceptance from college/university (if not yet attending).
  - c. Certified copy of the latest academic transcript or record on official letterhead or logo (if you are already at university).
  - d. Certified copy of status card showing Esk'etemc band membership.
8. Mail, email, or fax completed forms to:

#### Mail to:

ARM Scholarship Committee  
P.O. Box 78  
Alkali Lake, BC V0L1B0

#### Email or fax to:

Chevonne Stanislaus  
[chevonne@armltd.org](mailto:chevonne@armltd.org)  
Fax: 250-440-5680

**SECTION A – PERSONAL DETAILS OF APPLICANT**

1.	Surname				
2.	Given name(s)				
3.	Date of birth				
4.	Status number				
5.	Canadian citizen?	Yes <input type="checkbox"/>		No <input type="checkbox"/>	
6.	Gender				
7.	Residential address				
8.	Contact phone numbers	Home		Cell	
		Parent/ Guardian		Message	
9.	Email address				

**SECTION B – HIGH SCHOOL ATTENDED**

1.	Name of school			
2.	School address			
3.	Years attended	From:		To:

**SECTION C – POST-SECONDARY QUALIFICATIONS**

1.	Full name of highest qualification				
2.	Nature of qualification	Degree <input type="checkbox"/>		Diploma <input type="checkbox"/>	
3.	Status	Presently studying <input type="checkbox"/>		Discontinued <input type="checkbox"/>	
4.	If discontinued, for what reasons?				
5.	If presently studying, which year of study	1 <sup>st</sup> year <input type="checkbox"/>	2 <sup>nd</sup> year <input type="checkbox"/>	3 <sup>rd</sup> year <input type="checkbox"/>	4 <sup>th</sup> year <input type="checkbox"/>
6.	Student number				
7.	Name of institution				

8.	Address of institution				
9.	<b>Major Subjects</b>				Marks / % obtained
	i.				
	ii.				
	iii.				
	iv.				
	v.				
10.	<b>Auxiliary Subjects</b>				Marks / % obtained
	i.				
	ii.				
	iii.				
	iv.				
	v.				

**Attach proof of latest academic results or academic transcript(s).**

#### SECTION D – INTENDED STUDY FOR THE NEW ACADEMIC YEAR

1.	Name of qualification			
2.	Field of study			

#### SECTION E – DETAILS ABOUT NEXT OF KIN

1.	Full name				
2.	Relationship to you				
3.	Contact numbers	Home		Cell	
		Work		Message	
4.	Email address				

#### SECTION F – DECLARATION

I hereby, declare that **ALL** the information provided in this application form is complete and correct.

I hereby, acknowledge that if **ANY** of the information provided in this application form is found to be incomplete and/or incorrect, my application will be disqualified.

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

\_\_\_\_\_  
Date