



HOCKEY MANITOBA SCHOLARSHIP APPLICATION

Hockey Manitoba is fortunate to have the opportunity to offer a number of scholarships to our members in recognition of their hard work and dedication both in the classroom and on the ice. The commitment shown to the game, education and community is an integral part of developing our young athletes into strong community leaders. Hockey Manitoba is very pleased to be able to provide financial support to our graduating members to assist with post-secondary education.

Applicants completing this form are eligible for the following scholarships awarded annually:

GEORGE ALLARD MEMORIAL SCHOLARSHIP	\$1,500
JACK FORSYTH MEMORIAL SCHOLARSHIP	\$1,000
NICK HILL MEMORIAL SCHOLARSHIP	\$1,000
ORVILLE ACRES MEMORIAL SCHOLARSHIP	\$1,000 (female applicants only)
BILL ADDISON MEMORIAL SCHOLARSHIP	\$750
RALPH BORGER MEMORIAL SCHOLARSHIP	\$750
BOB CALDWELL SCHOLARSHIP	\$750
ABBIE COO MEMORIAL SCHOLARSHIP	\$750
SAM FABRO SCHOLARSHIP	\$750
IAN HEATHER SCHOLARSHIP	\$750
SHELDON LANCHBERY SCHOLARSHIP	\$750
BUCK MATIOWSKI MEMORIAL SCHOLARSHIP	\$750
DR. W.F. TAYLOR MEMORIAL SCHOLARSHIP	\$750
DIANNE WOODS MEMORIAL SCHOLARSHIP	\$750
CANAD INNS SCHOLARSHIP	\$750
JIM STIRLING MEMORIAL SCHOLARSHIPS	\$500 (two awarded annually)

ELIGIBILITY

Student athletes who are Hockey Manitoba members and Manitoba residents attending post secondary education within Canada. Applicant must be a graduating High School student.

Note: Applicants cannot be a carded Junior Hockey player.

QUALIFICATIONS

- Meet the admission standards of the University or Community College.
- Enrolled full time and receiving full time credits at a Canadian University or College.
- Community involvement.
- Hockey involvement.

HOW TO APPLY

Student athletes must complete application form which is available online or from the Hockey Manitoba office. Forms must be received by to **April 1st, 2017**.

The application must include:

- Letter of support from the President of Minor Hockey Association (if applicable) and/or Coach
- Letter of support from the School Principal
- A transcript or report with school grades from grades eleven and twelve
- One-page essay outlining community and hockey involvement
- A list of extracurricular activities

Scholarships are to be awarded annually in early May, and each recipient will be recognized at their respective school's award ceremony.

SELECTION

The Hockey Manitoba Awards & Scholarships Committee will review all applications. Awards will be based on academic performance in school, community and hockey involvement (playing, coaching and/or officiating).

SUCCESSFUL CANDIDATES

All successful candidates will be mailed their appropriate cheque to the address provided on the application form submitted. Each candidate must verify entrance into the Post Secondary Institute, including verification of tuition payment prior to receiving the appropriate scholarship.

RETURN COMPLETED SCHOLARSHIP APPLICATIONS TO:

Hockey Manitoba
Attn: Awards & Scholarships Committee
145 Pacific Avenue
Winnipeg, MB R3B 2Z6

DEADLINE APRIL 1, 2017



HOCKEY MANITOBA SCHOLARSHIP APPLICATION

1. NAME (Last, First) _____, _____ Sex: (M) (F)
2. HOME ADDRESS (City/Town, Postal Code) _____
3. EMAIL: _____ PHONE: _____
4. NAME OF HOCKEY MANITOBA REGISTERED TEAM THIS PAST SEASON:

EDUCATIONAL DATA

1. SECONDARY SCHOOL ATTENDED - GRADE 12 (GRADUATION)
SCHOOL: _____ ADDRESS: _____
PRINCIPAL: _____
EMAIL: _____ PHONE: _____
2. HIGH SCHOOL GRADE AVERAGES: SENIOR 1: _____ SENIOR 3: _____
SENIOR 2: _____ SENIOR 4: _____ (To date)

*** THE ABOVE SECTION MUST BE COMPLETED IN ADDITION TO ATTACHED TRANSCRIPT***

3. UNIVERSITY/COLLEGE APPLIED TO: _____
4. ACADEMIC STREAM AND MAJOR AREA OF STUDY: _____
5. PLEASE INCLUDE A ONE PAGE ESSAY THAT OUTLINES YOUR COMMUNITY AND HOCKEY INVOLVEMENT, AS WELL AS A LIST OF YOUR EXTRACURRICULAR ACTIVITIES.

APPLICATION CHECKLIST

- ___ COMPLETED APPLICATION FORM
- ___ LETTER FROM COACH AND/OR MHA PRESIDENT
- ___ LETTER FROM PRINCIPAL AND/OR SCHOOL ADMINISTRATOR
- ___ TRANSCRIPT
- ___ ESSAY
- ___ LIST OF EXTRACURRICULAR ACTIVITIES

DECLARATION

I DECLARE THAT ALL INFORMATION PROVIDED IS COMPLETE AND TRUE IN EVERY RESPECT AND THAT I SHALL BE ENROLLED AS A FULL-TIME STUDENT AT A CANADIAN UNIVERSITY OR COLLEGE IN THE UPCOMING ACADEMIC YEAR.

SIGNATURE OF APPLICANT _____ DATE SIGNED _____

SIGNATURE OF PARENT/GUARDIAN _____ DATE SIGNED _____

