|  |
| --- |
| Name: |
| Mailing Address: *(street/box number)* | City | Prov | Postal Code |
| Phone (Daytime) | Phone (Evening) | Email Address: |
| DOB*(yyyy/mm/dd)* |  |
| State your proposed course of study and where you would attend: |
| List the contact information of 3 individuals most familiar with your contributions to hockey |
| *Name* | *Address* | *Phone* |
| *Name* | *Address* | *Phone* |
| *Name* | *Address* | *Phone* |

**Scholarship Application**

4. List your involvements with hockey the last 3 seasons, on and off the ice and volunteer time whatever it may have been:

**2023-2024\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2022-2023\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2021-2022\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

5. List individual and team hockey awards you have received:

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

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

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

6. List contributions (other than hockey) you have made to your community:

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

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

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

*Please attach separate sheet if necessary*

**This application MUST BE ACCOMPANIED by the following:**

a) Letter from applicant’s hockey coach or referee-in-chief.

b) Copy of applicant’s school report with letter from school principal. In lieu of this application form, a personal letter of application outlining hockey and community contributions will be accepted.

**APPLICATION DEADLINE IS: June 15, 2024**

**GENERAL**

Scholarships will be awarded to SMHA registered members who apply and who best combine the qualifications set here under. SMHA gives recognition to their members who develop their academic career aspirations, at the same time nourishing their interest in hockey.

**ELIGIBILITY**

All scholarship candidates must currently be a member in good standing with both the SDMHA and VIAHA and be in their graduating year of high school or have already graduated from high school at the time of application.

**QUALIFICATIONS**

1. Sportsmanship;
2. Hockey ability and performance or quality of contribution; and
3. School and community participation.

**HOW TO APPLY**

1. Submit SMHAs Scholarship Application Form or name, address, phone number and a personal letter of application, which specifically outlines your hockey achievements;
2. League, team or category;
3. Letter from applicant’s hockey coach or referee in chief; and
4. Copy of school report with letter from school principal or other school official.

**SELECTION**

A selection committee of 3 executive members from SMHA will review applications.

**SCHOLARSHIP AVAILABILITY**

The SMHA scholarships will be made available to the successful applicants after proof has been received that they are attending a Post-Secondary Institution of their choice. All cheques will be payable to the successful applicant and the institution. SMHA scholarship winners may defer receipt of their awards for a period no longer than one academic year, however, deferment requests must be submitted in writing and include an explanation.

**DATE OF SUBMISSION: Please submit to Attn: Scholarship Committee c/o Sooke & District Minor Hockey Assoc. PO Box 383, Sooke BC V9Z 1G1 on or before June 15, 2024.**

**OR: Send PDF format of all documents to** **vp-admin@sookeminorhockey.ca** **, by the deadline noted above.**

***PLEASE NOTE:*** *All applications and supporting letters become the property of SDMHA. After the deadline, the Scholarship Committee along with the Executive of SDMHA will award one scholarship up to a maximum of $500.00*