

# APPLICATION FOR THE ANNUAL YORKTON MINOR HOCKEY SCHOLARSHIP

To:  
Yorkton Minor Hockey  
Box 415  
Yorkton, SK S3N 2W1  
[yorktonminorhockey@sasktel.net](mailto:yorktonminorhockey@sasktel.net)

Name of Applicant \_\_\_\_\_

Date of Birth \_\_\_\_\_ Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Number of years registered with YMH \_\_\_\_\_

Institution enrolled at \_\_\_\_\_

Course enrolled in \_\_\_\_\_

Course commence on \_\_\_\_\_ 20 \_\_\_\_\_

Enclosed are the following:

1. A copy of my most recent academic marks, one of which should be:

a) Statement from the Department of Education

2. A brief summary of activities in the community and/or school that I have participated in the role I played in each.  
Please be sure to include all activities.

**NOTE:**

**I have read the criteria governing the Yorkton Minor Hockey Scholarship application and I believe that I qualify.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

**\*Final application date is April 19<sup>th</sup> of the hockey season.**