

Award Application Form

School of Record:

- Chilliwack Secondary
 G.W. Graham Secondary
 Imagine Secondary
 Kwiyeqel Secondary
 Sardis Secondary

The following documents must be included for your application to be considered:

- Completed application form including Career Statement, Activities Resume and Budget.
- 2 References
- Transcript – Grades page only (black out PEN)
- Requested ‘extras’ such as a paragraph or cover letter. Do not add any unrequested documents.

Applicants MUST have a valid SIN number to apply for SD33 Financial Awards

Personal Information

First Name First Name	Last Name Last Name	Student Number: Student Number	Student Number Student Number
Preferred Name Click or tap here to enter text.		Preferred Pronouns (Optional) Click or tap here to enter text.	
Address Click or tap here to enter text.			
City City	Postal Code Postal Code	Telephone Phone Number	Email Email Address

Post-Secondary Plans

Career Goal Click or tap here to enter text.		
Post-Secondary Institutes that you have applied to (in order of preference)		
1st Choice Click or tap here to enter text.	Program Name Click or tap here to enter text.	Start Date Click to enter a date.
2nd Choice Click or tap here to enter text.	Program Name Click or tap here to enter text.	Start Date Click to enter a date.
3rd Choice Click or tap here to enter text.	Program Name Click or tap here to enter text.	Start Date Click to enter a date.

Affiliation

Please indicate membership or connection of yourself or family members to a particular organization if requested for a particular award.

Award Name Click to enter text.	Affiliation Click or tap here to enter text.
Award Name Click to enter text.	Affiliation Click or tap here to enter text.
Award Name Click to enter text.	Affiliation Click or tap here to enter text.
Award Name Click to enter text.	Affiliation Click or tap here to enter text.
Award Name Click to enter text.	Affiliation Mother’s or Guardian’s Name

Career Statement

Click or tap here to enter text.

Activities Resume

Community Based Activity: Involvement/Service to others/Employment/Athletics/Fine Arts/Clubs/Conferences/Camps/Workshops etc.

Grade	Name of Organization or Event	Select Applicable Category	Title and Description of Role	Total Number of HOURS (grades 10-12)
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.

School Based Activity:

Involvement/Service to Others/Work Experience/Apprenticeship/Leadership/Athletics/Fine Arts/Clubs

Grade	Name of Organization or Event	Select Applicable Category	Title and Description of Role	Total Number of HOURS (grades 10-12)
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.

Awards, Commendations or Positions of Leadership (Elected Positions, medals, awards, certifications etc)

Grade	Name of Organization	Title and Description of Role
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.

Special Circumstances

If you have circumstances that you feel should be considered when assessing this application, state them here. (150 word max)

Click or tap here to enter text.

Budget

Estimated Cost of First Year at a Post-Secondary Institution

Yearly Income

Personal Savings	\$0.00
Family Contributions	\$0.00
RESP	\$0.00
Work Income	\$0.00
Total Income	\$0.00

Yearly Expenses

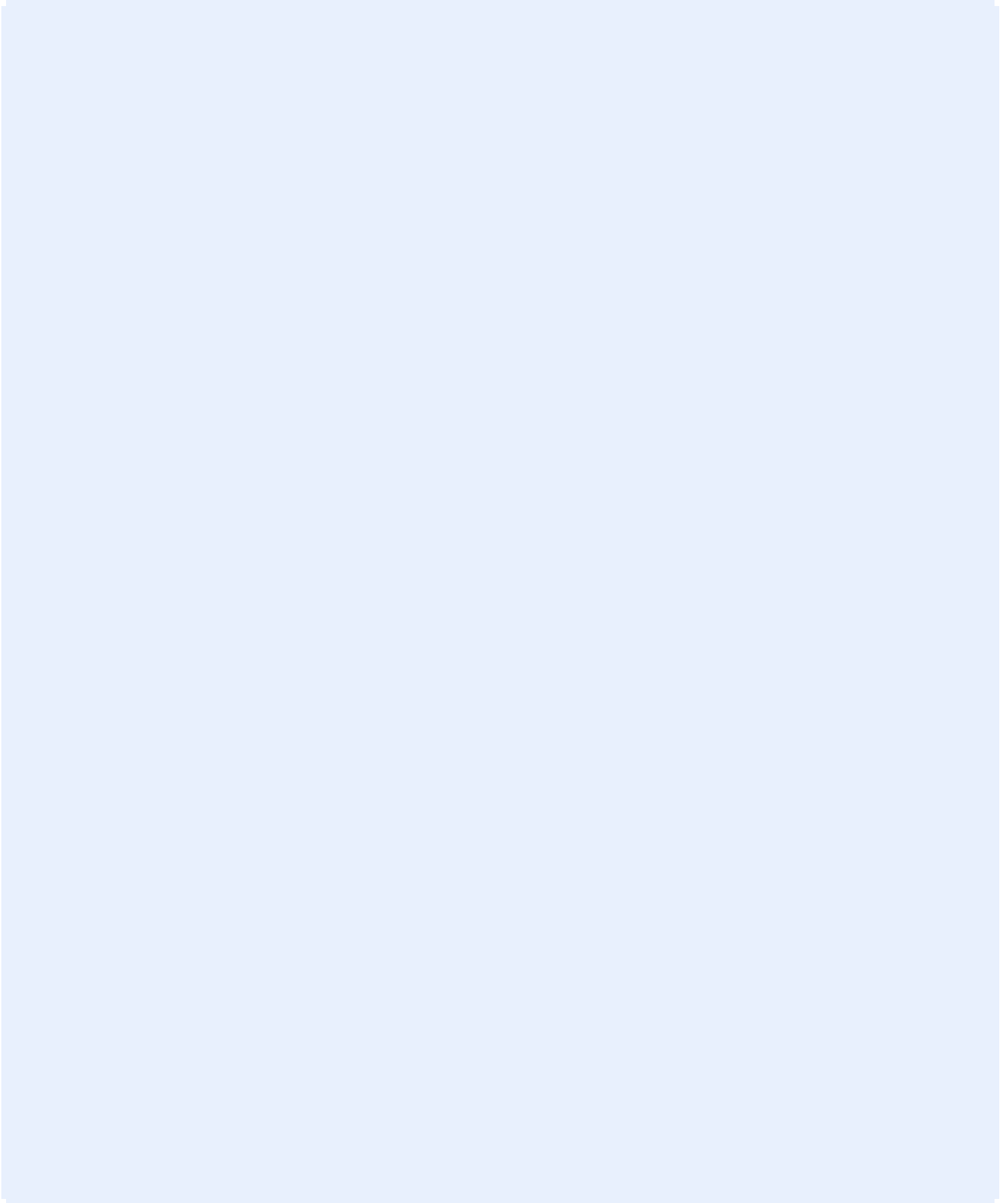
Tuition	\$0.00
Books, tools, other materials	\$0.00
Student Fees	\$0.00
Housing	\$0.00
Food	\$0.00
Clothing	\$0.00
Transportation	\$0.00
Phone	\$0.00
Utilities	\$0.00
Entertainment	\$0.00
Travel	\$0.00
Medical	\$0.00
Total Expenses	\$0.00

Total Need (Income minus Expenses)	\$0.00
---	---------------

Insert transcript here (grades page ONLY):

A large, empty light blue rectangular area intended for pasting a transcript.

Insert reference forms here:



Insert reference forms here:



Insert extra paragraph, essay or Chilliwack Foundation Grade Template (if required):

A large, empty light blue rectangular area intended for inserting an extra paragraph, essay, or template.