



SPROTT SHAW COLLEGE

SCHOLARSHIP APPLICATION PACKAGE



APPLICATION FORM

PERSONAL INFORMATION

Last Name _____ First Name _____

Address _____

City _____ Province _____ Postal Code _____

Phone Number _____ Email Address _____

Date of Birth (YYYY/MM/DD) _____

POST-SECONDARY INFORMATION

Secondary School _____ Current Grade _____

Date of Graduation _____ School Phone Number _____

Sprott Shaw College Program you are applying for _____

Signature _____ Date _____

ITEMS TO BE INCLUDED IN YOUR SUBMISSION

- Scholarship Application Form
- Grade 11 and/or 12 Transcripts
- An essay on the topic: "Why I am interested in my Program of Choice" (min. 300 words)

Please ensure all documents are included in one envelope

Admissions Advisor Information - CAMPUS USE ONLY

Program Weeks _____ Amount Requested _____

Advisor Name _____ Campus _____

Start Date _____

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