## **Conservation Scholarship Application**

Applicant Name	Phone Number:		
Mailing Address:			
Street (box number)	City	Province	Postal Code
Name of Parent or Legal Guardian:		Phone Number:	
Mailing Address:			
Street (box number)	City	Province	Postal Code
List in Chronological Order the High Sc	chools and Any Sub	sequent Educational Insti	tutions You May
Have Attended:			
1.			
2.			
3.			
4.			
be requested when available. The school accredited university or technical school guidelines.			
Name of Institution:			
Proposed Course Study:			
Include Two Letters of Character Refer	ences:		
Name:			
Address:			· · · · · · · · · · · · · · · · · · ·
Phone Number:			
Name:			
Address:			
Phone Number:			·
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Describe Your Extra Curricular Activities and Interests:

Describe Any Community Service or Involvement in Which You Have Been Involved:
Describe Any Details of Financial Needs That May Be Pertinent to This Scholarship:
All information will remain CONFIDENTIAL and is the property of the Lloydminster and District Fish and Game Association Inc.
Date:
Applicant Signature:
Send completed application and documentation to:
Lloydminster and District Fish and Game Association
Box 116
Lloydminster, Alberta
S9V 0X6
Attention: Conservation Scholarship Chairman
Completed applications with information must be received no later than September 20 <sup>th</sup> .