STUDENT SCHOLARSHIP APPLICATION

Alberta Association of Career Colleges

NOMINEE INFORMATION							
Last Name		First		M.I.	Date		
Street Address				Apartment/Unit #			
City		Province		Postal Code			
Phone		E-mail Address					
EDUCATION							
Member College Attended							
Graduation date		Program					
GPA or Program average							
Please Describe how you have contributed to your School Community (max 500 words)							
ATTACHMENTS							
Please attach an official transcript and a letter of nomination from your member college which should include information about your contribution to the school community, and at least one letter of reference from an instructor evidencing scholarly excellence							

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date