



## **CIBC Scholastic Award**

**ST. FRANCIS XAVIER UNIVERSITY**

Antigonish, Nova Scotia

[www.stfx.ca](http://www.stfx.ca)

### **APPLICATION FORM**

**TO:** Applicants, High School Guidance Counselors and Alumni Members

**HISTORY:** St. Francis Xavier University is pleased to offer the CIBC Scholastic Award. CIBC is committed to supporting causes that matter to their clients, employees and communities. CIBC aims to make a difference in communities through sponsorships with a strategic focus on youth and education.

**VALUE:** Entrance Awards of up to \$4000 will be granted.

**ELIGIBILITY:** The following criteria will guide this Scholastic Award:

- Demonstrated financial need.
- Demonstrated leadership achievements in community or school affairs as reflected by extracurricular activities.
- Provide two letters of reference outlining the applicant's leadership ability and participation in extracurricular activity.

**INSTRUCTIONS:** Applicants shall complete Sections I and II and send this form to the StFX Financial Aid Office along with official high school transcripts and two letters of reference, covering the area of academics, leadership achievements in community or school affairs as reflected by extracurricular activities.

**MAILING ADDRESS:** Attn: Financial Aid Office  
Office of the Registrar, StFX  
PO Box 5000  
Antigonish, NS B2G 2W5

**DEADLINE:** June 15<sup>th</sup>, 2016

## SECTION I

(Please type or print clearly using a black pen)

1. Name: \_\_\_\_\_  
(Surname) (Full Given Names)

Address: \_\_\_\_\_  
(Street – P.O. Box) (City) (Postal Code)

Date of Birth: \_\_\_\_\_  
(Day/Month/Year) (Telephone No.)

\_\_\_\_\_  
(E-mail)

2. Father: \_\_\_\_\_  
(or Guardian) (Name) (Occupation) (Employer)

Mother: \_\_\_\_\_  
(or Guardian) (Name) (Occupation) (Employer)

Dependent Brothers and Sisters: \_\_\_\_\_  
(Number) (Ages) (Status: at home or in school)

3. High School Attended: \_\_\_\_\_  
(Name)

School Address: \_\_\_\_\_  
(Street – P.O. Box) (City) (Postal Code)

School Contact Person: \_\_\_\_\_  
(Name) (Position)

\_\_\_\_\_  
(E-mail)

\_\_\_\_\_  
(Telephone Number)





## **SECTION II**

**1.** Two letters of reference, outlining the applicant's leadership ability and participation in extracurricular activity:

- Included with application, must be in sealed, signed envelopes
- Will be submitted directly to the Financial Aid Office by provider

**2.** Official High School Transcripts:

- Included with application
- Will be submitted directly to the Financial Aid Office by high school