



Robertson Holmes Memorial Scholarship

c/o Ms. A. Campbell-Dell, 227 Chemin Pardiac

New Richmond, QC, G0C 2B0

Phone: [418] 392-5087

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Website: www.robertsonholmes.org

Post Graduate Application Form

Date: _____

Name: _____ S.I.N. # _____

Address: _____

Phone Number: Day: _____ Evening: _____

E-mail address: _____

List of degrees and/or diplomas currently held, years obtained and identify the issuing institutions (attach copies where possible):

Attach copy of recent transcripts or indicate when these documents will be available.

Institution you plan to attend next year: _____

Program of Study: _____

Estimated duration of study: _____

Personal objective upon completion of study: _____

Please attach:

1. Proof of enrollment in the program you have chosen.
2. Three letters of reference, not from members of the Robertson Holmes Committee.
3. An estimate of your anticipated expenses which should take into account tuition, room & board, travel, books, etc...
4. An outline of your financial plans for this endeavor.

Upon receipt of a **COMPLETE** application, a member of the committee may contact you for an interview.

When might you be available for such an interview? _____

Please submit this form and all support documentation to the committee **NO LATER THAN JUNE 1st**.

APPLICATIONS UNSUPPORTED BY THE REQUIRED DOCUMENTATION OR RECEIVED BY THE COMMITTEE AFTER JUNE 1ST WILL NOT BE CONSIDERED.