



Prince George Gymnastics Club Scholarship Application



Date of Completion		
Y-A	M	D-J

APPLICANT DATA

Surname	Given Names	Sex F M	Date of Birth Y-A M D-J
Home Address	Mailing Address Same as Home Address		
	Home Telephone Number ()		
If in the event I choose to withdraw from my post secondary education during the scholarship year I will, when requested, reimburse the PGGC for all scholarship funds which were awarded to me.	Signature	PGGC Membership Active Former	Dates as Active Member

Applicant Secondary School Education Data

Secondary School	Last Official Transcript Attached	Grade Completed	Average Percentage
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Post Secondary School Course Of Study

Name of University/College Address	Dates of Enrollment (From/To)					
	Y-A	M	D-J	Y-A	M	D-J
Telephone Number ()						
Program Name / Degree Program						

School or Community Involvement

Letter Depicting School/ Community Involvement	Attached	Yes	No
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Reference(s)

Name	Address	Phone	Relationship

Scholarship Committee Use Only

Comments		
Approved	Not Approved	Signature:.....