# In Their Honour Memorial Scholarship Application

## Personal Information

Full Name: _____

Address: _____

City/Town: _____ Postal Code: _____

Phone Number: _____ Email: _____

Date of Birth: (MM/DD/YYYY)_____

## Academic Information

High School Name: _____

Post-secondary school currently attending (if any):

_____

Anticipated Graduation Date: _____

Current GPA or Average: _____

Post-secondary institution accepted to **OR** continuing studies at:

_____

Program Name: _____

Intended Career Path (First Responder or Health Care): _____

## Personal Statement (500-750 words)

Please attach a separate document addressing the following:

- What inspired your chosen career path?
- How do you embody the values of **Cst. Brett Ryan** (e.g., courage, compassion, integrity)?
- How have you been involved in your community or in volunteer work?
- Are you or do you have a family member who is a First Responder or in the Health Care field? **Yes** _____ **No** _____
- If yes, who are they, your relationship to them, and what type of First Responder/ Health Care field are they in?

_____

## Supporting Documents Checklist

- Copy of High School Transcript
- Proof of Post-Secondary Acceptance
- Copy of post-secondary school transcript (if currently attending)
- One Letter of Reference (Second optional)
- Any additional documentation (e.g., volunteer records)

## Declaration

I confirm that all information provided is accurate to the best of my knowledge. I understand that incomplete applications may not be considered.

Signature: _____ Date: _____

**Submit Application to: info@intheirhonour.ca**