



FVICBA 2022 STUDENT AWARD APPLICATION

| APPLICANT INFORMATION | |
|--|--|
| Prefix: | |
| First Name: | |
| Last Name: | |
| Secondary School: | |
| Email: | |
| Phone: | |
| Address: | |
| City: | |
| Province: | |
| Postal Code: | |
| POST-SECONDARY EDUCATION | |
| Name of School (1 st Choice): | |
| Program: | |
| Name of School (2 nd Choice): | |
| Program: | |
| PARENT/GUARDIAN INFORMATION | |
| Name: | |
| Relationship: | |
| Email: | |

COMMUNITY/VOLUNTEER ACTIVITIES/PART-TIME JOBS (Please include number of hours and volunteer work – virtually or in person)

EXTRA-CURRICULAR ACTIVITIES (Leadership, Sports, Clubs, etc.) – 1000 characters maximum.

CAREER ASPIRATIONS – 1000 characters maximum.

ABOUT ME (If you have any special circumstances or additional information you want included, please provide)

FINANCIAL INFORMATION (Financial support for your first year of post-secondary education)

Student's contribution:

Contribution from family:

Other student awards:

Total:

EXPENSES FOR YOUR FIRST YEAR OF ACCREDITED POST-SECONDARY EDUCATION (* do not enter an amount here if you are living at home and not paying rent)

Tuition and Fees:

*Room or Room & Board:

Total Expenses:

DISCLAIMER: By signing this application, you agree that Fraser Valley Indo-Canadian Business and its directors and the donor of your award may use your name, grad photo and other information about you in their publications, both printed and/or online, as well as consent to the release of your name, grad photo and other information for use in local newspapers.

PLEASE ENSURE YOU HAVE INPUT ALL THE INFORMATION REQUIRED.

PRINT and SIGN this copy. If you are under the age of 19, have your Parent/Guardian sign as well. Give your complete application package to your Counsellor.

SIGNATURE OF APPLICANT

SIGNATURE OF PARENT/GUARDIAN