

Donato Salon + Spa Scholarship Application

Applicant Information

Full Name: _____
Last First

Address: _____
Street Address Apt /Unit #

_____ City Province Postal Code

Phone: _____ e-mail Address: _____

Are you a Canadian Citizen? yes no

If no, are you authorized to live in Canada? yes no

Do you have a student visa? yes no

Education

High School: _____ Phone: _____

Address: _____
Street Address

_____ City Province Postal Code

Attended From: _____ (m/d/y) To: _____ (m/d/y)

Current Overall Grade Point Average (%): _____ Current Grade: _____

What is your graduation date? _____ (m/d/y)

Employment

Please list any summer, volunteer or part-time jobs, if any:

Employer: _____ Position: _____

From: _____ (m/d/y) To: _____ (m/d/y)

Employer: _____ Position: _____

From: _____ (m/d/y) To: _____ (m/d/y)

Disclaimer and Signature

I certify that the answers are true and complete to the best of my knowledge. If this application leads to my receiving a scholarship, I understand that false or misleading information in my application or interview may result in termination of the scholarship. I understand that the information I submit will be used to assess my eligibility for a scholarship. I have read and agree to all terms and conditions for the Donato Academy Scholarship.

Signature: _____ Date: _____

How did you hear about the Donato Academy Scholarship?

Please see refer to information package for instructions on how to apply for our scholarship and the terms and conditions. This information may also be viewed online at: www.donatoacademy.ca/scholarship



Handwritten notes in blue ink:
I am a student at Donato Academy and I am applying for the scholarship. I have read and agree to all terms and conditions for the Donato Academy Scholarship.