



GIRL GUIDES OF CANADA-GUIDES DU CANADA
QUÉBEC COUNCIL SCHOLARSHIP APPLICATION FORM

Mail to: GGC-Québec Council
Chair, Scholarship Selection Committee
100 boul. Alexis-Nihon, Suite 270
Saint Laurent, QC H4M 2N7

Email to: qc-awards-prix@guidescanada.ca

- 1. Your GGC-Québec scholarship application must include:
- This application form – completed
- One letter of reference from a Member of Guiding.
- One letter of reference from outside Guiding.
- Photocopy of your latest academic transcript of marks (only).
2. Any additional information/documents/letters sent with your application will not be considered.
3. All applications must be received by GGC-Québec Council on or before the first day of June.
4. This scholarship is conditional on acceptance to a full-time program at an institution of the applicant's choice.
5. The recipient must remain in Guiding (not necessarily in Quebec) for the next Guiding year.

GUIDELINES: (Please print clearly or type)

Name: First name as recorded in iMIS Family name as recorded in iMIS iMIS number

Address: Civic # and Street City Province Postal Code

Telephone #: ()

Date of birth: Email address:

Educational institution currently attending:

Proposed Québec institution if not currently enrolled:

- 1.
2.
3.

Program/Course:

Year entering: (Please highlight or circle)

CEGEP [1 2 3 4] UNIVERSITY [1 2 3 4] TECH/VOC [1 2 3 4] POST GRADUATE [1 2 3 4 5]

Present position in Guiding: Ranger Lones Link Guider Trefoil Guild

Other:

Please give positions held and outline experience (including level of achievement)

- Spark
Brownie
Guide
Pathfinder
Ranger
Cadet
Jr. Leader
Guider
Link
Lone
Trefoil Guild

What role has Guiding played in your life?

Service/volunteer involvement (inside and outside Guiding) including employment positions held:

Additional interests and activities outside Guiding:

Please give the name, address and position of two people who are not relatives (one from within Guiding and one from outside Guiding) whom you are asking for letters of reference:

1. _____

2. _____

If chosen, I agree to allow my name and photograph (if requested) to be published by GGC-Québec Council. I attest that the information given above is accurate and true:

Applicant's Signature

Date

All information is confidential. We do not provide or sell our information outside the World Association of Girl Guides and Girl Scouts.