

**Application Form**  
**For**  
**George F. Flood Memorial Scholarship**  
**Administered by**

Saint John Construction Association  
And  
Saint John Construction Information Centre

263 Germain Street

Saint John, N.B.

E2L 2G7

Phone: 633-1101

Fax: 633-1265

E-Mail: [sjcic@nb.aibn.com](mailto:sjcic@nb.aibn.com)

Note: If you are enrolling as a first year student in a University or College, then you must attach a transcript of your most recent high school marks with this application. As these marks are updated, it is imperative that a copy of all revisions be submitted to the Association as they are received. Failure to do this may disqualify this application.

During University or College, a transcript of your marks, plus all the latest revisions must be submitted in the same manner as instructed above.

Transcripts and Revisions must be submitted by July 31st, each year, to be considered. A total of Five Thousand Dollars will be given.

All applications must be made on this form, which must be completed and returned by August 1<sup>st</sup>.

Submissions by fax or e-mail will be accepted, however original transcript of marks must be received prior to awards.

**About yourself**

Name \_\_\_\_\_

Surname

Given Names

Full mailing address \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

**About your Education**

Where did you complete your secondary education and in what year?

\_\_\_\_\_

University or College which you plan to attend this fall

\_\_\_\_\_

as a 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> year or Graduate student in a program that will lead to \_\_\_\_\_ Degree or Certificate.

Anticipated year of Graduation \_\_\_\_\_

Have you been accepted by this University or College? Yes No

Are you attending a Summer School? \_\_\_\_\_ Reason?

\_\_\_\_\_

**For Post First Year Students in University or College who are Changing Courses or Institutions this year**

University attended last year \_\_\_\_\_

Degree program last year \_\_\_\_\_

Reason for this change \_\_\_\_\_

**Your Qualifications**

You or one of your parents must:

- A) Belong to the Saint John Construction Association and/or Saint John Construction Information Centre
- B) Be an Employee of a Member of the Saint John Construction Association and/or Saint John Construction Information Centre
- C) Be a Member of Staff of the Saint John Construction Association and/or Saint John Construction Information Centre

**Certification**

I, \_\_\_\_\_, a signing officer of  
\_\_\_\_\_

Certify that this applicant, or a Parent of the applicant is employed with our organization

\_\_\_\_\_ Signature \_\_\_\_\_ Date

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Note: Financial need is one of the criteria that is taken in account for the awarding of these scholarships. To assist in the assessment process, we require some financial data to make this judgement. We ask that this information be provided, with reasonable accuracy. The entire application for these Scholarships will be kept strictly confidential.

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**About your Family:**

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Full-time or Part-time

Employer: \_\_\_\_\_ Years employed

Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Full-time or Part-time

Employer: \_\_\_\_\_ Years employed

Total Family Annual Income

up to \$20,000    \$20-30,000    \$30-40,000    \$40-50,000    \$50-60,000    Over \$60,000

Not including yourself, please list the dependents in your family who are attending school, college, or university and their ages:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Please list the year, amount, duration and Name of any Scholarship or Bursary that you have been awarded in past years:

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Are there any other financial grants or loans being made to you at this time to further your education?

Yes    No

If the answer is yes, please give brief details and the amounts of these grants or loans.

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About your activities:

Use this space to describe the highlights of your extra-curricular activities, athletic achievements, and special talents at High School or University.

Use this space to detail the highlights of any community or volunteer work you have done during your education years.

Use this space to indicate the employers with whom you have had work experience, duration and responsibilities (start with most recent).

Use this Space to write a Paragraph in which you describe to the Review Committee, how important winning a Scholarship Award will be to your Educational Career:

Please submit two Academic References who could attest to your capability if asked to do so by the Review Committee. Please submit names, Positions, Schools and a valid phone number for a daytime call in the Month of August of the current year.

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Attach copies of all Transcripts, Letters of Reference or additional documents as attachments.

Date of this Application \_\_\_\_\_ Signature of Applicant \_\_\_\_\_