

Robertson Holmes Memorial Scholarship

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Email: gedell@telus.net Website: www.robertsonholmes.org

Mature Student Application

Date:	
Name:	S.I.N. #
Address:	
Phone Number: Day:	Evening:
E-mail address:	
Previous Education (List institutions, locat diplomas attained.):	ion, years of study and certification and/or
Name and address of the institution you p	lan to attend next year:
Program (Name and Length):	

Please attach:

THAN June 1st.

- 1. Proof of enrollment in your chosen program.
- 2. A copy of your most recent academic transcript.
- 3. Three letters of reference.
- 4. An estimate of your anticipated expenses which should take into account tuition, room & board, travel, books, etc...
- 5. An outline of your financial plans for this endeavor.

Upon receipt of a COMPLETE application, a member of the committee may contact you for an interview.
When might you be available for such an interview?
Please submit this form and all support documentation to the committee NO LATER

APPLICATIONS UNSUPPORTED BY THE REQUIRED DOCUMENTATION OR RECEIVED BY THE COMMITTEE AFTER JUNE 1ST WILL NOT BE CONSIDERED.