**Campbell DeVore Scholarship Application**

This information is collected for the purposes of determining suitability for a scholarship to recognize outstanding achievement. Users of this information are administrators, teachers, and support staff of the school. Information from this form will become part of the official record of the pupil’s educational history. Contact person for queries concerning this information collection is the Principal of Wellington Heights.

Selection of scholarship winners is at the sole discretion of the Wellington Heights SS staff awards committee and all of their decisions are final.

Deadline for application is June 7, 2019 at 4:00 p.m. to Ms. Campbell in the WHSS office.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 M/DD/YY

What year did you enter Grade 9? \_\_\_\_\_\_\_\_\_\_\_\_ What year did you receive your OSSD\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Have you been a registered student at Wellington Heights for the last four semesters? Y\_\_\_N\_\_
2. If your answer to # 1 is no and/or if you have not received 14 senior level credits at Wellington Heights please give any extraordinary circumstances that you would like the Awards Committee to consider your application.
3. List the College/University and programs to which you have applied. Indicate programs to which you have been accepted.

Indicate which College/University you will be attending:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **In – school activities:**

List all in-school activities in which you have actively participated while at Wellington Heights S.S. Do not include activities for which you were paid.

 Activity Years of Participation

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. **Outside of school activities:**

List all community activities in which you have actively participated while at Wellington Heights S.S. Do not include activities for which you were paid.

 Activity Years of Participation

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. Is there any other information you wish to the committee to consider? (i.e. Special awards or recognition, work experience or volunteering etc.).

***Please include with your application a non-official copy of your transcript. This can be obtained at the office.***

Office file (O)/commencement/Campbell De Vore Application - 2019