



2018 TRAJAN MARTIN MEMORIAL AWARD

DESCRIPTION OF THE AWARD

An endowment fund has been established by family and friends in memory of Trajan Martin who passed away at the age of 26. Trajan was an adventurous leader, he encouraged those around him to push themselves to do their best and to experience as much as possible. His motto could have been: "Do it now as tomorrow may never be."

An award of \$1,000 will be offered to a student from the North Shore who demonstrates compassion, adventure, integrity, and exuberance for life.

ELIGIBILITY CRITERIA

In order to be considered for the Trajan Martin Memorial Award, a student must:

- Be a student from the North Shore;
- Applicants must be between the ages of 16 and 25.
- Applicants must include a typed 500 word essay explaining how they meet the criteria. A member or representative of the Martin family will be invited to take part in the selection process.

SELECTION CRITERIA

- Demonstrate compassion, adventure, integrity, and exuberance.

APPLICATION FORM CHECKLIST

- One original application form
- Your typed essay
- One letter of reference from your school
- One letter of reference from your community
- One copy of an official transcript of grades including provincial exam results for grades 10, 11 and 12 (Students should submit available transcripts and mid-term marks for their grade 12 subjects not yet completed.)

MAILING INSTRUCTIONS & DEADLINE INFORMATION

- All applications must be received by **April 3, 2018**.
- Email completed applications to: Scholarship Committee at info@westvanfoundation.com
- Incomplete and late applications will not be accepted

FURTHER INQUIRIES

West Vancouver Community Foundation office 604-925-8153 or visit www.westvanfoundation.com.



2018 TRAJAN MARTIN MEMORIAL AWARD APPLICATION

IMPORTANT: Applicants must read instructions on pages 1 & 2 before completing this application.

Last Name: _____ First: _____ Preferred Name: _____

Female Male Date of Birth [D/M/Y]: _____

Canadian Citizen/Permanent Resident/Student Visa: _____

Mailing Address/Street: _____

City: _____ Province: _____ Postal Code: _____

Home Telephone: _____ E-mail: _____

Social Insurance Number: _____

Are you an International Student? Yes No

How important are the following factors in your decision to apply for this scholarship? (enter relevant number into the box between 1-5; 1 = not really important, 5 = very important)

Recognition of accomplishments Financial Need

How will you be financing your post secondary education? (add in Y for Yes in any or all)

Parent/s Student Loan Scholarships Work Other

EDUCATIONAL HISTORY, list all secondary schools you have attended, starting with the most recent:

Grade	School	City/Town	Years Attended (Start/End)

COLLEGES/UNIVERSITIES/TECHNICAL SCHOOLS YOU ARE CONSIDERING, IN ORDER OF PREFERENCE:

Institution Name	Location	Program Name	Program Length

ACTIVITIES

PLEASE TELL US WHAT ACTIVITIES YOU HAVE BEEN INVOLVED IN DURING THE PAST THREE YEARS (Grade 10 – 12). (IF NECESSARY ATTACH ADDITIONAL INFORMATION)

EXTRACURRICULAR ACTIVITIES AT SCHOOL (ATHLETIC, COMMUNITY LEADERSHIP ETC.)

YEAR	NAME OF ACTIVITY	BRIEF DESCRIPTION OF ACTIVITY (POSITIONS HELD)	HRS/MONTH; MONTHS/YR

EXTRACURRICULAR ACTIVITIES OUTSIDE OF SCHOOL (ATHLETIC, VOLUNTEER, TRAINING, EMPLOYMENT, COMMUNITY LEADERSHIP ETC.) (IF NECESSARY ATTACH ADDITIONAL INFORMATION)

YEAR	NAME OF ACTIVITY	BRIEF DESCRIPTION OF ACTIVITY (POSITIONS HELD)	HRS/MONTH; MONTHS/YR

PLEASE PROVIDE NAMES AND CONTACT INFORMATION FOR VERIFICATION OF ACTIVITIES LISTED.

SCHOOL AWARDS/RECOGNITION

DATE	NAME OF AWARD	DESCRIPTION OF AWARD

AWARDS & ACHIEVEMENTS OUTSIDE OF SCHOOL

DATE	NAME OF AWARD & ORGANIZATION	DESCRIPTION OF AWARD

HOBBIES & INTERESTS:

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CONFERENCES/COMPETITIONS ATTENDED:

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HOW DID YOU FIRST HEAR ABOUT THIS SCHOLARSHIP? (please tick all that apply)

Teacher/Counsellor Website Friend(s) Other (Specify) _____

I hereby declare that the information contained in this application is to the best of my knowledge correct and complete. If awarded a scholarship, I authorize the West Vancouver Community Foundation to release the following information to the donor/sponsor of the award if requested: my name, address, telephone number, and any information contained in this application which is relative to the special requirements of the award.

Date

Signature of Applicant

LETTER OF REFERENCE FROM SCHOOL & FROM YOUR COMMUNITY

This page is to be filled out by your reference from school and from your community. Make sure to choose someone who is not a relative or a friend but who knows you and your activities well.

Name of Applicant _____

The above-named scholarship candidate has provided your name as a reference. As the Foundation's Scholarship Committee is currently considering this applicant, we would like to receive a statement from you concerning the candidate's character and abilities. The Committee looks for qualities of character, intellect, self-reliance, self-discipline, leadership and team spirit, as well as the ability to work cooperatively with others.

Please complete the section below and return it with your letter of reference. You may provide it to the applicant in a sealed envelope, or mail it directly to the Foundation at the address shown below.

The deadline for 2018 scholarship submissions is April 3, 2018.

Name of reference: _____ Title: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Day Telephone: _____ Evening Telephone: _____ Email: _____

I have known the applicant for the period of _____ to _____

I know the applicant in my role as: _____

Please email this form together with your letter of reference to:

Scholarship Committee at info@westvanfoundation.com