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| A black background with a black square  Description automatically generated with medium confidence | **Scholarship Application Form** |

1. General Information:

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| Last Name: |  | First Name: |  |
| Date of Birth: |  | SJA Division: |  |
| Mailing Address: |  |
| City: |  | Province: |  | Postal Code: |  |
| Email Address: |  | Phone Number: |  |
| Scholarship: |  |
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1. All Supporting Documents:

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| Prepare the following separate documents for your application:1. **Application Form with a 500 to 1000 word Personal Statement** (page 2 of this form)
2. **Resume**
3. **Cover Letter** (with a brief outline of post-secondary pursuits and reasons why a profession in health care was chosen)
4. **Official School Transcript** (signed by the registrar confirming their final grades from a recently completed school year)
5. **Recommendation Letter** (from your Divisional Superintendent)
6. **Media Release Consent Form**

We recommend requesting your school transcript and recommendation letter as early as possible to ensure a smooth application process. These documents are crucial for your scholarship application and obtaining them well in advance will help avoid any last-minute issues. |

1. **Personal Statement**

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| In a short essay format (500 - 1000 words), please articulate how your academic pursuits, chosen career path, personal interests, and goals align with the mission of this scholarship and the mission of St. John Ambulance BC & Yukon. Your response should showcase a strong connection between your aspirations and the scholarship's mission, emphasizing the positive impact you aim to make within your community and beyond. |

Write your personal statement here:

1. **Submission**

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| Once you have prepared all your application documents, submit them online at <https://sja.ca/en/bcy-scholarship-application> |

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