

# PACIFIC RIM FOUNDATION

PO Box 589 • Tofino, BC • V0R 2Z0  
pacificrimfoundation@gmail.com

## DICK CLOSE SCHOLARSHIP APPLICANT INSTRUCTIONS

All scholarship applicants must use this fillable PDF form.

This PDF application must be submitted via email to [pacificrimfoundation@gmail.com](mailto:pacificrimfoundation@gmail.com) along with your most recent transcript(s).

We suggest you use Microsoft Word (or similar software) to prepare and save the answers to each of the following questions. Once all questions have been completed in this manner, they can be copied and pasted into this fillable PDF form.

Up to three letters of support may be submitted to support your application. Each letter must be submitted by the reference (the author of the letter of support) via email to [pacificrimfoundation@gmail.com](mailto:pacificrimfoundation@gmail.com).

Please do not contact Pacific Rim Foundation for help or questions about the application process. If you need assistance in this process please use the support network available at USS.

<b>FULL NAME:</b>			
<b>ADDRESS:</b>		<b>EMAIL:</b>	
<b>CITY:</b>		<b>POSTAL CODE:</b>	<b>BC</b>
<b>HOME PHONE:</b>		<b>CELL PHONE:</b>	

<b>GRADE AVERAGE:</b>	_____ Please attach most transcript(s)
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**WHAT ARE YOUR PLANS IMMEDIATELY AFTER GRADUATING USS?**

**DESCRIBE AND LIST YOUR WORK EXPERIENCE**

**WHAT ARE YOUR EXTRACURRICULAR ACTIVITIES AND YOUR INVOLVEMENT IN THEM?**

**WHAT DO YOU CONTRIBUTE TO YOUR COMMUNITY?**

**WHY IS THIS SCHOLARSHIP IMPORTANT TO YOU?**

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**WHAT DO YOU THINK YOUR EXPENSES WILL BE FOR THE FIRST POST-SECONDARY YEAR?**

<b>1. Tuition:</b>	
<b>2. Books:</b>	
<b>3. Transportation:</b>	
<b>4. Room and Board:</b>	
<b>5. Entertainment:</b>	
<b>6. Other:</b>	
<b>7. Total:</b>	

**REFERENCES: (3)** *Your references should attest to your scholastic abilities, community contributions, work experience and extracurricular activities. Please ask references to email letters directly to [pacificrimfoundation@gmail.com](mailto:pacificrimfoundation@gmail.com).*

**SCHOLARSHIP APPLICANT AGREEMENT - PLEASE READ CAREFULLY:**

I certify that all the information on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this form, my transcripts and additional supporting documentation submitted as part of this application. I give permission to the selection committee to contact high school officials and my references. If selected, I give permission for a publicity release and to share information contained in my application with appropriate scholarship donors. I agree with the responsibilities of being the selected recipient of this award.

By <b>typing my name below</b> , I certify that I agree to the above Scholarship Applicant Agreement:	By <b>typing my name below</b> , I certify that I am the parent or legal guardian of the applicant:
<b>APPLICANT CONSENT:</b>	<b>PARENT or GUARDIAN CONSENT:</b>

*Please attach your most recent transcript(s) and email them along with your completed application to [pacificrimfoundation@gmail.com](mailto:pacificrimfoundation@gmail.com).*

*Please ask your references to email letters directly to [pacificrimfoundation@gmail.com](mailto:pacificrimfoundation@gmail.com).*