



625 Main Street, Unit Y, Sussex, NB, E4E 7H5 (506)433-6244

Email: sacfi@nb.aibn.com Web: www.sacfi.org

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### Sussex Area Community Foundation Scholarship Guidelines

The following conditions and regulations will be considered in selecting the winners of this award. In 2021, there will be five (5) Sussex Area Community Foundation Scholarships awarded at a value of \$2600.00 each.

# The SACF Scholarship Applicant must be a current graduating student of Sussex Regional High School who:

- . shows academic achievement;
- . demonstrates socially responsible behaviour;
- . demonstrates a desire for self-improvement and
- . plans to attend a fully accredited post-secondary university or public college in the fall of 2021. (This must not be a private institution)

#### **Consideration will be given to students:**

. who may not otherwise be able to continue their education due to financial concerns.

## You must include the following information with your application:

- 1. Acceptance letter or conditional acceptance letter from post-secondary institution.
- Copy of your latest transcript (Spring) with Grade 11 & 12 marks (A transcript with all grade 11, all first semester final and midterm grade 12 marks.) Applications cannot be processed in the absence of these transcripts.
- 3. A letter(s) of recommendation.

It is the responsibility of the Applicant to meet all deadlines. Application deadline is <u>May 26, 2021 at 12pm</u>. Mail, email or drop off your application along with your <u>Spring Transcript and all other pertinent information</u> to the address on the Application Form.

The Scholarship Recipients will be announced at Sussex Regional High School **Graduation Exercises** on June 24th, 2021.

The scholarship will be forwarded to the recipient's university or college account once **proof of attendance** is received at SACFI office. (sacfi@nb.aibn.com)



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## **Sussex Area Community Foundation**

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## **SCHOLARSHIP APPLICATION FORM 2021**

Name: (Last)	/		(Middle)
Address:	ldress: Postal Code:		
Telephone No.:	Email:		
	nber(optional): ber necessary if awarded schol		
Parent(s)/Guardian(s)	Name:		
What institution will y	ou be attending this fall?		
What are the start and	d end dates of your program?	Start:/_ Number of Yea	
Program name:			
Financial need will be	e a consideration. If you feel	you have exce	•
Financial need will be circumstances, pleas attach letter) Please list school act	e a consideration. If you feel of a consideration. If you feel of a provide, in detail, a letter exit ivities you were involved with	you have exce cplaining your n while at SRH	financial ne
Financial need will be circumstances, pleas attach letter) Please list school act	e a consideration. If you feel go e provide, in detail, a letter ex	you have exce cplaining your n while at SRH	financial ne
Financial need will be circumstances, pleas attach letter) Please list school act Nam	e a consideration. If you feel ge provide, in detail, a letter exitivities you were involved with the of Activity	you have exce cplaining your n while at SRH Years Pe	financial ne
Financial need will be circumstances, pleas attach letter) Please list school act Nam	e a consideration. If you feel of a consideration. If you feel of a provide, in detail, a letter exit ivities you were involved with	you have exce cplaining your n while at SRH Years Per	financial ne S: r Activity  igh school: Years Per
Financial need will be circumstances, pleas attach letter)  Please list school act Name	e a consideration. If you feel to be provide, in detail, a letter exitivities you were involved with the of Activity	you have exce cplaining your  while at SRH Years Per	financial ne S: r Activity  igh school: Years Per
Financial need will be circumstances, pleas attach letter)  Please list school act Name  Please list community Organization	e a consideration. If you feel to e provide, in detail, a letter exitivities you were involved with the of Activity  y activities you were involved Type of Work/Volunteer	you have exce cplaining your while at SRH Years Per I with during h Hours Per One Year	financial ne S: Activity  igh school: Years Per Activity
Financial need will be circumstances, pleas (attach letter) Please list school act Nam	e a consideration. If you feel to be provide, in detail, a letter exitivities you were involved with the of Activity	you have exce cplaining your  while at SRH Years Per	financial ne S: r Activity  igh school: Years Per



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13.	In your own words, what is your understanding of the Sussex Area Community Foundation?			
15.	e you a Canadian Citizen: YES  NO  sou are successful, you agree that your picture can be published: YES NO sertify that the above questions have been answered truthfully to the best of my bowledge. Use extra paper if needed to support your application. Be sure to ach your Spring transcript.			
Signa	ture: Date:			
Deadl	line for application is: May 26, 2021 (12pm).			
consideration mailed application	e ensure all pertinent information is enclosed or the application will not be dered. Applications and attachments can be dropped off at 625 Main Street, Unit Y, d to 625 Main Street, Unit Y, Sussex, NB, E4E 7H5 or emailed to sacfi@nb.aibn.com. All rations and supporting documents must be received before the deadline. (Please note ACF office is open by appointment.)			
office	arship recipients are to forward the name of their school, the address of the financial and social insurance number to the Sussex Area Community Foundation before ember 17, 2021 in order to receive the scholarship.			
Checl	klist for Scholarship Application:			
	Completed Scholarship Application Spring Transcript Acceptance (or Conditional Acceptance) Letter from post-secondary institution Letter of Reference Any Support Documentation you feel is necessary			