

CANADIAN ITALIAN BUSINESS AND PROFESSIONAL ASSOCIATION 665 Hewitson St., Thunder Bay, ON P7B 5V5

SCHOLARSHIP AWARD \$500 College & \$500 University

This award supports one college and one university bound student.

Goal:

To assist children of CIBPA members achieve their academic and personal goals.

Award objectives:

*to acknowledge the hard work and outstanding achievements of a son or daughter of a CIBPA member

*to provide financial assistance to help the graduate pursue their post-secondary goals

Application Requirements:

This award is presented to a student that has demonstrated outstanding academic achievements and obtained a minimum of 80% during his/ her high school career. The successful candidate will be required to demonstrate his/ her positive contribution to the Thunder Bay community.

Check list:

- 1. Candidates must complete the Online Scholarship Application Form by September 30, 2022.
- 2. Answer all questions on the Scholarship Application Form.
- 3. Submit a copy of the most recent transcript or report card.
- 4. Submit an up to date resume.
- 5. Submit an essay of 500 words or less (see essay theme for details).
- 6. Submit a certificate of admission to a post secondary learning institution as proof that the candidate has been officially accepted for full time studies at a recognized university or college for the school year in which this application has been made.
- 7. Applications **must** be received on or before <u>September 30, 2022</u> and mailed to the address on the header (attention: Scholarship Awards Committee).
- 8. The candidate's parent must be a CIBPA member in good standing for a minimum of 12 months.

ESSAY THEME:

Canada's rich multicultural heritage has made it possible for people of all backgrounds to take an active part in building our great nation while expressing and maintaining their own cultural identity.

How have Italian-Canadians made a distinct contribution to Canada's identity while practicing and maintaining their own culture in the context of Canadian society?.

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SCHOLARSHIP APPLICATION FORM

Please print

Parent/Guardian's Name (CIBPA member): _	
Applicant's Name:	Signature:
Permanent Address:	
City:	
Province:	
Postal Code:	
Home Phone:	
Cell Phone:	
Email Address:	
STUDIES:	
Institution you are presently enrolled:	Faculty:
PREVIOUS ACADEMIC HISTORY:	
Institution:	
ADADEMIC AWARDS RECEIVED TO DATE:	
List:	
COMMUNITY INVOLVEMENT:	
List:	

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