

KALUN CLIFF CHAN MEMORIAL SCHOLARSHIP APPLICATION

1. Name in full:

_____ (Surname) (Given Name) (Initial)

2. Mailing Address:

_____ (Street) (City) (Province) (Postal Code) (Telephone)

3. Permanent Address:

_____ (Street) (City) (Province) (Postal Code) (Telephone)

4. School at which you are registered:

Course of studies in which you have registered:

(Faculty, school, option, major)

Ultimate educational objective:

5. High School Graduation:

School	City/Town	Date of Completion

6. Post-Secondary Institutions Attended:

Name of Institution	Field of Study	City/Town	Date of Attendance

7. Outline your involvement in school and community activities:

8. Describe any involvement you have had in activities related to solid waste management or environmental protection (eg. employment, volunteer work, thesis project, research, papers):

9. Elaborate on your career goals and how they relate to solid waste management or Environmental Protection::

10. Are you an employee of the Region of Halton or a member of SWANA?: _____

11. Is an immediate relative an employee of the Region of Halton or a SWANA member? Please provide their name: _____

I declare the above information is true and correct:

Signature

Date