



The Trudy Galloway Memorial Bursary

To be presented annually at The Hockey Manitoba Awards Banquet in the amount of \$750.00

ELIGIBILITY

- Hockey Canada certified official (any level).
- An official within Hockey Manitoba.
- Graduating in the current year from high school and accepted/registered in a post-secondary facility:
 - a. A university within Manitoba
 - b. A community college within Manitoba
 - c. Any other post-secondary facility as approved by awards committee
- An individual that is graduating with a minimum 80% average.
- An individual that is involved in their community.
- An individual that is held with high regard for their citizenship from their peers, teachers, Referee-in-chiefs' and community leaders.
- Full intentions to continue on as an active official, working for the betterment of the program both on and off the ice.

QUALIFICATIONS

- Complete the bursary award application form from Hockey Manitoba
- Provide letters of recommendation from both:
 - a. A teacher or principal
 - b. Area Referee-in-chief
- Complete a one-page essay on what they would like to do to better the officiating program within their area.

HOW TO APPLY:

Applications must be completed and returned to:

**Hockey Manitoba
Attn: Scott Furman
145 Pacific Ave
Winnipeg, MB
R3B 2Z6**

Application Deadline: March 1, 2012

TRUDY GALLOWAY MEMORIAL BURSARY APPLICATION FORM

PERSONAL DATA

1. NAME: _____, _____
2. HOME ADDRESS: _____
3. NAME OF HOCKEY MANITOBA TEAM WHOM WHICH YOU WERE REGISTERED WITH LAST YEAR:

EDUCATIONAL DATA

1. SECONDARY SCHOOL ATTENDED - GRADE 12 (GRADUATION)
SCHOOL: _____ LOCATION: _____
PRINCIPAL: _____
ADDRESS: _____
2. UNIVERSITY REGISTRATION NUMBER: _____
3. ACADEMIC STREAM: _____
4. MAJOR AREA OF STUDY: _____
ENROLLED IN _____ UNITS (CREDITS) THIS ACADEMIC YEAR.
5. STATE GRADE AVERAGES: SENIOR 1: _____ SENIOR 3: _____
SENIOR 2: _____ SENIOR 4: _____
6. ON A SEPARATE PAGE PLEASE STATE YOUR EXTRACURRICULAR INVOLVEMENT WITHIN THIS PAST SCHOOL YEAR
(I.E. COMMUNITY INVOLVEMENT, OTHER SPORT ACTIVITIES PARTICIPATED IN)

FUNDING DATA:

1. I HAVE APPLIED FOR AND/OR RECEIVED ASSISTANCE FROM THE FOLLOWING:
 - A) PROVINCE OF MANITOBA GRANT Yes ___ No ___
 - B) FEDERAL GRANT-IN-AID PROGRAM Yes ___ No ___
 - C) UNIVERSITY SPORTS AWARD Yes ___ No ___
 - D) SPORT MANITOBA ASSISTANCE PROGRAM Yes ___ No ___
 - E) OTHER (Please Specify) Yes ___ No ___
_____ Yes ___ No ___

CONDITIONS OF ASSISTANCE

I HEREBY APPLY FOR FINANCIAL ASSISTANCE AND MAKE THE FOLLOWING DECLARATION:

I DECLARE THAT ALL INFORMATION GIVEN HERE IS COMPLETE AND TRUE IN EVERY RESPECT, THAT I HAVE ANSWERED ALL QUESTIONS APPLICABLE TO ME ON THIS FORM, THAT I SHALL BE A FULL TIME STUDENT FOR THE EDUCATIONAL PERIOD STATED.

SIGNATURE OF APPLICANT _____

DATE SIGNED _____

SIGNATURE OF PARENT/GUARDIAN _____

DATE SIGNED _____