



# Samson Education Trust Fund

## APPLICATION FOR GRADE 12 ACHIEVEMENT AWARD

BAND #444.0 \_\_\_\_\_

**STUDENT INFORMATION:**

STUDENT'S LEGAL SURNAME: \_\_\_\_\_

STUDENT'S GIVEN NAME: \_\_\_\_\_

MIDDLE INITIAL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
DAY MONTH YEAR

ADDRESS:

TELEPHONE: ( ) \_\_\_\_\_ OTHER #: \_\_\_\_\_

**APPLICATION DEADLINE: 1 year after graduation or convocation**

NAME OF SCHOOL:

LOCATION:

PHONE #:

FIRST PARENT OR LEGAL GUARDIAN (IF MINOR, UNDER 18 YEARS OLD)

SURNAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

RELATIONSHIP WITH STUDENT: \_\_\_\_\_

ADDRESS OF FIRST PARENT OR LEGAL GUARDIAN'S (If different from student's)

HOME PHONE:

BUSINESS PHONE:

**WE REQUIRE THE FOLLOWING TO ACCOMPANY YOUR APPLICATION:**

**OFFICIAL TRANSCRIPT \_\_\_\_\_**  
**COPY OF OFFICIAL DIPLOMA \_\_\_\_\_**  
**PHOTOCOPY OF MEMBERSHIP CARD \_\_\_\_\_**

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
DATE

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