



Evans Caddie Scholarship

Indication of Interest

Please Print Clearly

Date of Application _____

Last Name _____

First Name _____

Father's Name _____

Mother's Name _____

Guardian's Name _____

Street Mailing Address _____

Town or City _____

Postal Code _____

Home Telephone _____

Parent Cell _____

Parent Email _____

Student Email _____

Date of Birth (D/M/Y) _____

Gender _____

Name of School _____

Current Grade Level _____

Year of Graduation _____

School Telephone _____

Guidance Counsellor's Name & Phone Number _____

Scholarship Representative's Name & Phone Number _____