



Jorge Campos Scholarship Application for Admission

PERSONAL INFORMATION

Family Name:

First Name:

Middle Name: English Name: _____

Mailing Address: _____ Male Female

City: _____ Citizenship: _____

Country: _____ Postal Code: _____ Birthdate: _____
Year Month Day

Phone: _____

Emergency Contact: _____ Emergency Phone: _____

Email: _____ Fax: _____

AGENT

AGENT/REFERRAL (if applicable):

Name of Agency: _____ TRU ID# _____

Contact Name: _____ Email: _____

Address: _____ Mobile Phone: _____

City: _____ Phone: _____

Country: _____ Postal Code: _____ Fax: _____

TRU STUDY

Anticipated start date at TRU

September January May Year _____

Intended Course of Study _____

ACADEMIC HISTORY

Senior High School Attended: _____

From: (year) _____ To: _____ Grade Completed: _____ Accumulated GPA _____

All Universities or Colleges Attended: Attach all transcripts (if applicable)

1) _____ Dates Attended: _____ Degrees/Diplomas Granted _____

2) _____ Dates Attended: _____ Degrees/Diplomas Granted _____

What did you do last year: (Circle 1) **1** Secondary School **2** College **3** University **4** Labour force **5** Other

Where did you live last year: (Circle 1) **1** British Columbia **2** Another Province **3** Outside Canada

DECLARATION

REMEMBER: 2 Letter(s) of recommendation

SPORT-SPECIFIC INFORMATION:

I understand that applying for a Jorge Campos Scholarship does not guarantee receiving the scholarship.

Signature: _____ Date: _____