APPLICATION FOR KENN BOREK MEMORIAL SCHOLARSHIP

А. Аррисан/Сонта	et information				
Name:					
Phone Number:					
Permanent Address:			Mailing Ad	ldress (if different):	
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B. Aviation Studies	Information				
Course Title:					
Accredited					
Accredited Post-Secondary Institution	1:				
Location:					
Type of Program: (X)	Certificate	()	Diploma	() Degree	()
Academic Year:	Start		***************************************	Finish	
Tuition Fees:					
C. Career Goals					
Briefly describe your cared	er goals:				
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D.	Volunteer/	Community Service				
Briefly outline your volunteer and/or community service activities:						
Section 1						
E.	Self-Motiv	ation				
Brief	ly provide exa	amples of how you are a self-starter:				
	J 1					
F.	Support D	ocumentation				
Pleas	se ensure that	the following information is supplied with this application:				
		Proof of Canadian citizenship				
		Proof of NWT, Yukon, Nunavut, British Columbia or Alberta residency				
		Proof of age				
		Letter of acceptance or conditional acceptance in an aviation program at an accredited post-secondary institution				
		Copy of High School Diploma or equivalent training certificates				
		Academic transcripts				
		Three reference letters				

G. Declaration/Terms and Conditions

I, the undersigned, certify that the information I have provided is true and accurate. I grant permission for the administrators of the Kenn Borek Memorial Scholarship to obtain my official transcripts from academic institutions and to speak to my personal references, if necessary. I further understand that the Kenn Borek Memorial Scholarship is awarded for use in the current academic year only and will be paid directly to the accredited institution that offers the aviation program in which I am or will be enrolled. I further understand that any tax implications resulting from an award of the Kenn Borek Memorial Scholarship to me will be my responsibility.

Applicant's Name (Print)	
Applicant's Signature	Date

Deadline: February 29, 2008

Mail to: Northern Air Transport Association (NATA)

P.O. Box 2457

Yellowknife, NT X1A 2P8

Or Fax: (867) 920-2983