

**Charitable Irish Society of Halifax
Post- Secondary Study Scholarship Program
For Society Members**

Application

Name _____

Mailing Address _____

_____ Postal Code _____

Date of Birth _____

Phone _____ Email _____

Please indicate your membership category:

Single Member

Family Member **Grandchild of the following Member**

Name of High School _____

Address _____

_____ Postal Code _____

Expected Graduation Date _____

Transcripts (Unofficial)

Attached

To Follow

(Attach transcript for last semester completed)

Name of Referee: _____ (Enclose Letter)

Indicate the post-secondary institution which you will be attending in September, and the program in which you plan to enroll.

Post-Secondary Institution _____

Program _____

Mail To:

Charitable Irish Society of Halifax

P.O. Box 31244

Halifax, N.S. B3K 5Y1

*Completed Applications, Including All Support Documents, Must Be Received No Later
Than April 15th, 2017*