Academic/Athletic Awards
ACADEMIC REFERENCE FORM

This section is to be completed by the School Counsellor or Principal.

SECTION I.

APPLICANT INFORMATION					
LAST NAME		FIRST NAME		Middle Initial(s)	

SECTION II.

REFERENCE INFORMATION					
LAST NAME		FIRST NAME			
SCHOOL NAME		PROFESSIONAL TITLE			
ADDRESS					
CITY/ TOWN		POSTAL CODE			
PHONE NUMBER	(902)	FAX NUMBER	(902)		
EMAIL ADDRESS	@				
LENGTH OF TIME ACQUAINTED WITH APPLICANT (YEARS)		STUDENT RANK GRADE XI		STUDENT RANK GRADE XII	
COURCES ARE SEMESTERED OR FULL YEAR (CHECK ONE)	SEMESTERED ☐	FULL YEAR COURSES ☐			

SECTION III.

Please provide any pertinent information which you believe makes the above student an ideal candidate for an HNS Academic/Athletic Award (Include an attachment if necessary):

SECTION IV.

Please provide a recommendation on applicant for this scholarship and comments on the programme of future study that he/she has selected (Please include your evaluation for applicant's personal motivation and promise). If you prefer not to make a recommendation, please state accordingly.

Have you included the following?

Official transcript of marks? ☐

Letter of Reference (Optional)? ☐

Signature of School Official Date

Applications must be received no later than deadline specified on Hockey NS website and forwarded to:
Hockey Nova Scotia 7 Mellor Avenue, Unit 17, Dartmouth, Nova Scotia, B3B 0E8