



London Marconi Scholarship Application

NAME: _____

ADDRESS: _____

TELEPHONE: _____ CELL: _____

EMAIL: _____

DATE OF BIRTH: _____

Marconi Member: _____ Relationship: _____

Scholastic Information (list most recent first)

	School	City	Dates	Course/Degree
Present				
Previous				
Previous				

Current Academic Average: _____

Graduation Date: _____

Extracurricular Activities:

Activities	Organization	Date

Employment History:

Employer	Duties	Date

Awards:

I agree that the application and all the information may be used for the purpose of evaluation and selection by the London Marconi Scholarship Committee and/or representatives designated by the Committee.

Signature: _____ Date: _____

Scholarship checklist:

- Completed and signed Application
- Transcript of grades from three (3) most recent semesters
- Confirmation of School Registration (University of College)

VERY IMPORTANT:

● TO BE CONSIDERED, THE APPLICATION AND ALL ATTACHMENTS MUST BE COMPLETED AND POSTMARKED BY **MARCH 15** FOR THE NEXT FOLLOWING ACADEMIC YEAR. THIS DEADLINE IS STRICTLY ENFORCED.

● **Only students residing in London and surrounding area and have an affiliation with the Marconi Club will be considered for a scholarship.**

Mail application and supporting material to:

Scholarship Committee
Marconi Club of London
120 Clarke Road
London, ON
N5W 5E1