## **Central Ontario Leadership Memorial Scholarship Application**

Name (Last, First, Middle Initial)	() Phone	E-mail	
Home Address (Street)	(City)	(Prov.)	(Postal)
 Birthdate (yy/mm/dd) Hig	ch School Presently At	tending Anticip	pated date of Graduation
Participated in 3 day seminar	Year attended CC	DLS 1 da	y PLAY Day
COLS Club name :			
College or Universities you w 1.			
2 3			

Please answer the following seven (7) questions using a maximum of three (3) pages with a minimum font of 12pt.

- 1. Describe any honors, prizes, etc. you have received for outstanding academic work in school and/or any activities you engaged in during High School. (i.e. Organizations, Athletics, Publications, Student Council, etc.) Include Positions or Office Held.
- 2. List your community service activities. (in detail).
- 3. List your COLS and COAA related activities chronologically (in detail).
- 4. Describe how COLS has impacted your life.
- 5. What is your idea of a leader?
- 6. What is the most powerful word in the English language? Why?
- 7. How do you plan to contribute to society after your formal education?

	Address	Phone	Email
School			
Name	Address	Phone	 Email
.Character			
Name	Address	Phone	Email

Please list below, three (3) references that would be familiar with 1) your COLS

experience, 2) your school experience, and 3) your character.

Please return application to me by e-mail fraser.helenm@gmail.com by May  $10^{th}$  by 11:59 pm. Or mail to COLS, 427 Olde Village Lane, Shelburne, ON L9V 3A5 no later than midnight on May 4,2017

Date

Signed