

**KEMPTVILLE COLLEGE ALUMNI ASSOCIATION SCHOLARSHIP APPLICATION FORM**

NAME \_\_\_\_\_

(PLEASE PRINT)

ADDRESS \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

NAME OF PARENT or GUARDIAN

\_\_\_\_\_

CONTACT PHONE NUMBER and EMAIL

\_\_\_\_\_

NAME OF RELATIVE(S)/FRIEND(S)/EMPLOYER WHO GRADUATED FROM KAS/KCAT  
AND YEAR OF GRADUATION

\_\_\_\_\_

*Preference will be given to the person who does have a relative that graduated from Kemptville. Alternatively, provide the name and year of an employer or family friend of yours that graduated from KAS/KCAT.*

APPLICANT MUST BE ENTERING THEIR **SECOND** YEAR OF STUDIES IN A FOOD OR AGRICULTURE RELATED PROGRAM AT AN ACCREDITED COLLEGE IN SEPTEMBER **2021** .

1. State your college year, college course and name of college.
2. Applicant's plans on completion of course?
3. RESPONSIBILITIES AT HOME, FARM or JOB – give approximate hrs. per week
4. COMMUNITY ACTIVITIES – church, Jr. Farmers, 4-H, etc. ( explain your role in each)
5. SCHOOL, COLLEGE Accomplishments – (including High School graduation, awards, certificates, etc.)
6. Paragraph titled "Where I hope to be in 5 years...  
– consisting of approximately 100 words. Typewritten.

TWO SCHOLARSHIPS, EACH WITH A VALUE OF \$500.00 WILL BE AWARDED:  
ONE SCHOLARSHIP TO A STUDENT IN THE AGRICULTURE RELATED PROGRAM in  
their second year  
ONE SCHOLARSHIP TO A STUDENT IN THE FOOD RELATED PROGRAM in their  
second year

APPLICATION DEADLINE: **JANUARY 31, 2022**

SEND COMPLETED FORM TO: Audrey Baker, 109 Rosedale Road South, SMITHS  
FALLS, ON, K7A 5B8

Or E-mail FORM TO: [a.bakercl@hotmail.com](mailto:a.bakercl@hotmail.com)

Phone contact: 613-283-5033