BCVFA Scholarship Application Primary Reference: either the Company President or Chief Officer

(Reference should not be related to the applicant)

This page to be completed by the applicant prior to providing the form to the officer

Applicant name:		
Company:	Date joined:	
Applicant's LOSAP number :		
Name of College of University:		
Name of degree program and major in wh	nich you are/will be enrolled:	
Date you started this program:	Expected date of completion:	

BCVFA Scholarship Application

Reference from Company President or Chief Officer

To be completed by the company of	<u>ficer</u>	
Officer name:	Title:	
Company:		
Phone:	Email:	_
Please confirm the following: Is the applicant currently in good sta	anding with the company: Yes	No
Did the applicant earn 50 LOSAP po	pints in the calendar year preceding this a	application: Yes No
Briefly describe the applicant's engastation expectations.	gement at the company and indicate if the	ne engagement is aligned with
Briefly describe the impact you belied they should receive a scholarship.	eve the scholarship will have on the appli	icant and if you believe
You can provide the signed and come this form directly to scholarship@bc	apleted form to the applicant to submit. As evfa.org on or before April 1, 2025. Date:	lternatively, you can email
Reference Signature.	Datc	